



**Limited English Proficient and Sensory Impaired
Client Services
Policies and Procedures Manual**

February 2004

**The Georgia Department of Human Resources
Office of Policy and Government Services
Limited English Proficient and Sensory Impaired Client Services
2 Peachtree Street N.W.
Suite 28-222
Atlanta, Georgia 30303**

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Section I - Introduction and Legal Authority

Introduction

The Georgia Department of Human Resources (DHR or the Department) is committed to ensuring that limited English proficient (LEP) and sensory impaired (SI) clients have meaningful access to all programs and activities conducted or supported by the Department. To this end, DHR will take reasonable steps to secure and utilize interpreters, translators and other necessary communicative resources when serving LEP and SI clients. In all situations, language and other communication assistance is administered in accordance with the DHR Plan for Client Services for Persons with Limited English Proficiency and Sensory Impairment (State LEP/SI Plan) and is contingent on the availability of resources.

DHR will offer communication assistance in programs and services offered directly by the Department, its divisions and offices, as well as those funded by grant in aid resources to county, regional and local offices. DHR regulates services to LEP and SI customers accessing direct assistance programs administered by the Division of Family and Children Services; Division of Aging Services; Division of Mental Health, Developmental Disabilities and Addictive Diseases; Division of Public Health; Office of Adoptions; Office of Child Support Enforcement; and, Office of Regulatory Services. In addition, meaningful language access is ensured by all entities contracting with the department for the provision of services.

The U.S. Health and Human Services – Office of Civil Rights (HHS/OCR) approved the State LEP/SI Plan in July of 2002. The State LEP/SI plan is incorporated into this policies and procedures manual and is also attached as Annex A. This plan establishes general policies and procedures for implementing a statewide strategy to assess service needs and to identify and develop the necessary resources and methods for service delivery to LEP/SI applicants.

Because each of the aforementioned divisions and offices operates according to a specific policy and procedural manual, this LEP/SI manual complements existing manuals by offering additional, non-conflicting guidance on serving LEP/SI customers. DHR's divisions and offices have compared the content within this LEP/SI manual with pre-existing manuals and have reconciled any differences in interpretation to meet the intent of Federal and State law.

This policies and procedures manual is consistent with Federal laws and guidance prohibiting discriminatory practices on the basis of race, color, national origin, age, gender, disability, or religion in programs and activities receiving Federal financial assistance. DHR programs are primarily regulated in accordance with Title VI of the Civil Rights Act of 1964, as amended; Presidential Executive Order 13166; the Americans with Disabilities Act of 1990; §504 of the Rehabilitation Act of 1973; the Age Discrimination Act of 1975, Title IX of the Education Amendments of 1972, the Personal Responsibility and Work Opportunity Reconciliation Act of 1996; the Illegal Immigration Reform and Immigrant Responsibility Act of 1996; The Privacy Act of 1974; Official Code of Georgia Annotated Sections 24-9-100 through 24-9-106; Interim Guidance on Verification of Citizenship, Qualified Alien Status and Eligibility under Title VI of the personal Responsibility and Work Opportunity Reconciliation Act of 1996, 62 Fed. Reg. 61, 344 (Nov. 17, 1997) (hereinafter DOJ Guidance); and Verification of Eligibility for Public Benefits" INS Proposed Rule, 63 Fed. Reg. 41, 662 (August 4, 1998) (hereinafter INS Proposed Rule); and

HHS Guidance to Federal Financial Assistance Recipients Regarding the Prohibition Against National Origin Discrimination Affecting Limited English Proficient Persons, August 3, 2003 (68 FR Number 153).

The LEP/SI Policies and Procedures manual is written in five sections. Section I provides an introduction and identifies the legal authority behind this action. Section II addresses DHR's policies for providing meaningful access to programs. Section III provides policy on determining eligibility to Federal programs for the foreign-born, Section IV establishes DHR's procedures for taking reasonable steps toward providing meaningful access to services for LEP/SI clients, and Section V provides guidance about the complaint resolution and monitoring process.

Legal Authority

Title VI of the Civil Rights Act of 1964, 42 U.S.C §§ 2000d et. Seq.:

Title VI prohibits recipients of Federal financial assistance from discriminating on the basis of race, color, or national origin. Title VI applies to intentional discrimination and policies, practices or procedures that have a disparate impact on the basis of race, color, or national origin. (Requiring information regarding citizenship or immigration status, and requests for social security numbers which are immaterial to eligibility determinations, may have an adverse effect on the basis of national origin).

Presidential Executive Order 13166 "Improving Access to Services for Persons with Limited English Proficiency (LEP)":

The Executive Order requires Federal agencies to examine the services they provide, identify any need for services to those with LEP, and develop and implement a system to provide those services so LEP applicants and beneficiaries will have meaningful access to them. It is expected that agency plans will provide for such meaningful access consistent with, and without unduly burdening, the fundamental mission of the agency (U.S. Department of Justice Civil Rights Division).

Americans With Disabilities Act of 1990 (ADA):

The ADA gives Federal civil rights protections to individuals with disabilities similar to those provided to individuals on the basis of race, color, sex, national origin, age, and religion. It guarantees equal opportunity for individuals with disabilities in public accommodations, employment, transportation, state and local government services, and telecommunications.

An individual is considered to have a “disability” if he or she has a physical or mental impairment that substantially limits one or more major life activities, has a record of such impairment, or is regarded as having such impairment. Persons with Human Immunodeficiency Virus (HIV) disease, both symptomatic and asymptomatic, have physical impairments that substantially limit one or more major life activities and are, therefore, protected by the law (HHS/OCR).

Section 504 of the Rehabilitation Act of 1973:

“Section 504 protects “qualified” individuals from discrimination based on their disability. Under this law, individuals with disabilities are defined as persons with a physical or mental impairment, which substantially limits one or more major life activities. People who have a history of, or who are regarded as having a physical or mental impairment that substantially limits one or more major life activities, are also covered. Major life activities include caring for one’s self, walking, seeing, hearing, speaking, breathing, working, performing manual tasks, and learning (HHS/OCR).

Age Discrimination Act of 1975:

“Pursuant to regulations prescribed under section 6103 of the Age Discrimination Act of 1975, no person in the United States shall, on the basis of age, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance” (HHS OCR).

Title IX of the Education Amendments of 1972:

Title IX prohibits states that “no person in the United States shall, on the basis of sex, be excluded from participation in, be denied the benefits of, or be subject to discrimination under any education program or activity receiving Federal financial assistance,” with exceptions. Title IX also states that “no person in the United States shall, on the ground of blindness or severely impaired vision, be denied admission in any course of study by a recipient of Federal financial assistance for any education program or activity; but nothing herein shall be construed to require any such institution to provide any special services to such person because of his blindness or visual impairment” (U.S. Department of Labor, Title 20 U.S.C. Sections 1681 and 1684).

Title IV of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PRWORA):

Title IV of the PRWORA provides that, with certain exceptions, only United States citizens, United States non-citizens nationals and “qualified aliens” (and sometimes only particular categories of qualified aliens) are eligible for federal, state, and local public benefits. PRWORA requires the U.S. Attorney General to promulgate final regulations requiring verification that an applicant is a qualified alien eligible to receive federal public benefits under PRWORA (62 Federal Register, Number 221).

Illegal Immigration Reform and Immigrant Responsibility Act of 1996:

This Act amends the PRWORA to establish fair and nondiscriminatory procedures for applicants to provide proof of citizenship, qualified alien status, and eligibility under Title IV of the PRWORA (62 Federal Register, Number 221).

The Privacy Act of 1974:

States must comply with the Privacy Act and other federal laws when seeking disclosure of an individual's Social Security Number (SSN). Under the Privacy Act, § 7(a), states are prohibited from denying an individual any right, benefit, or privilege

provided by law because of the individuals' refusal to disclose his or her SSN unless such disclosure is required by Federal statute, or the state maintains a system of records in existence and operating before January 1, 1975, and the disclosure of the SSN was required under statute or regulation adopted prior to that date to verify the identity of an individual.

Where a state is not authorized to require an individual to disclose his/her SSN, states may request that individuals voluntarily provide SSNs. However, under the Privacy Act, any time a state agency requests an individual to disclose his or her SSN, that agency "shall inform that individual whether that disclosure is mandatory or voluntary, by what statutory or other authority such number is solicited, and what uses will be made of it." (Privacy Act of 1974 § 7 (b)). Thus, in the Medicaid application process, states can ask non-applicant parents for their SSNs to verify income, but to avoid a potential violation of the Privacy Act, they must clearly indicate that the provision of the information is voluntary and that their SSNs will be used, for example, only to verify their income. States also should inform the non-applicant parents that the failure to provide their SSNs voluntarily will not affect the eligibility of their child, if otherwise eligible.

The Privacy Act, as a general rule, prohibits states from denying program benefits to certain applicants who do not disclose their SSNs if the disclosure is not required by Federal statute. In addition, separate and apart from the Privacy Act prohibitions, Medicaid, Peachcare for Kids (SCHIP) and Food Stamp laws and Federal policies prohibit states from denying benefits to an applicant because of the failure of another household member to disclose his or her SSN.

Interim Guidance on Verification of Citizenship, Qualified Alien Status and Eligibility under Title VI of the personal Responsibility and Work Opportunity Reconciliation Act of 1996, 62 Fed. Reg. 61, 344 (Nov. 17, 1997) (hereinafter DOJ Guidance) and Verification of Eligibility for Public Benefits" INS Proposed Rule, 63 Fed. Reg. 41, 662 (August 4, 1998) (hereinafter INS Proposed Rule):

These two Guidance describe how states should determine if they need to verify immigrant status to establish eligibility for Federally funded benefits and, if they are

required to do so, how that verification should be done. The Proposed rule states that it should be used “in tandem” with the DOJ guidance and that the DOJ Guidance should be followed to the extent that it is consistent with the proposed regulations.

HHS Guidance to Federal Financial Assistance Recipients Regarding the Prohibition Against National Origin Discrimination Affecting Limited English Proficient Persons, August 3, 2003:

This guidance establishes criteria and methods of administration that may be used by Federal financial recipients to avoid discrimination based on race, color, or national origin (68 Federal Register Number 153).

Official Code of Georgia Annotated Sections 24-9-100 et seq.:

These sections secure the rights of hearing impaired persons, who because of impaired hearing, cannot readily understand or communicate in spoken language and who consequently cannot equally participate in or benefit from proceedings, programs, and activities of the courts, legislative bodies, administrative agencies, licensing commission, departments, and boards of the state and its subdivisions unless qualified interpreters are available to assist them (O.C.G.A. 24-9-100 et seq.).

Section II - DHR's Policy for Taking Reasonable Steps to Provide Meaningful Access to Services for LEP/SI Clients

Organizational Commitment

The Department shall have in place specific written policies and procedures, both at state and local levels concerning language access. The responsibilities for carrying out these policies are shared between the Department as a whole through the Office of Policy and Government Services and the various County Offices, Regional Offices, Health Districts and State Office Programs that provide direct benefits or services to potential or actual clients. This document shall designate the Division, Office, or specific staff position responsible for implementing activities related to these policies and procedures. Representatives from DHR's divisions and offices will assist with implementation by serving on the State Language Access Team (LAT), as of local Client Language Services Coordinators (CLSC), and Problem Resolution Team (PRT) members.

Responsibilities of the Department

DHR's Office of Policy and Government Services (OPGS) will coordinate and implement the State LEP/SI Plan by serving as the primary point of contact for the LAT who subsequently serve as primary point of contact for the county, regional, and state program CLSCs. This office has the following specific responsibilities:

- hiring a LEP/SI program coordinator to implement the program, respond to compliance issues, monitor and evaluate programs and submit written progress reports to HHS OCR;

- maintaining DHR's Limited English Proficiency and Sensory Impairment (LEP/SI) policy and keeping it current and relevant;
- convening working committees, which assist with all implementation phases, including monitoring and evaluating programs. (Working committees include the LAT that consists of representatives from 15 divisions and offices at the State level. CLSCs representing 5 divisions and offices at the regional, district and county levels, a PRT to address compliance issues statewide, and a Citizens Advisory Committee. The Department will maintain an up-to-date list of all working committee and members);
- developing training for working committee members, new and in-service employee training, and interpreter training;
- recruiting interpreters and translators for statewide service and maintaining information about language resources in an accessible format;
- working with the county, regional and state program offices, to assess the language and resources needs of direct service programs at the county level;
- overseeing, along with programs, the translation and printing of critical forms and educational materials into languages most often and significantly encountered in the state;
- working, along with the program divisions and offices and with the Office of Information Technology, to ensure that the agency's electronic systems include alerts and information on clients' language needs;
- monitoring LEP/SI services and contracts at the state, regional and county levels;

- managing contracts for telephone interpreting services, sign language interpreter services, interpreter/translator testing contracts, and other statewide contracts that provide language services to LEP/SI clients;
- receiving, reviewing and investigating appropriate complaints of discrimination based on disability or national origin as they relate to language assistance; and
- serving as the point of contact for State-level and Federal-level compliance reviews.

Responsibilities of the Language Access Team Members (LAT)

The LAT shall consist of at least one state-level representative from the following divisions and offices:

- Division of Aging Services (DAS)
- Division of Family and Children Services (DFCS)
- Division of Mental Health, Developmental Disabilities & Addictive Diseases (MHDDAD)
- Division of Public Health (DPH)
- Office of Policy and Government Services (OPGS)
- Office of Adoptions (OAS)
- Office of Audits (OA)
- Office of Child Support Enforcement (OCSE)
- Office of Communications (OCS)
- Office of Financial Services (OFS)
- Office of Investigative Services (OIS)
- Office of Human Resources & Organizational Development (OHROD)
- Office of Human Resource Management (OHRM)
- Office of Information Technology (OIT)
- Office of Regulatory Services (ORS).

LAT members must accomplish the following:

- provide input into the design and implementation of products and services for LEP/SI clients from the perspective of each division and office represented,
- serve as the single point of contact for their respective CLSCs,
- keep the LEP/SI Coordinator informed of the status of LEP/SI services within each area,
- ensure the completion of the annual self-assessment processes, and
- prepare local language assistance plans if deemed necessary through the self-assessment process.

Responsibilities of Client Language Service Coordinators (CLSC)

The director of each Health District, DFCS region, MHDDAD region, and Child Support region will designate a local CLSC. The DFCS will designate one representative for each county (159). These representatives will report directly to the DFCS LAT member. The DPH and MHDDAD will appoint CLSCs to represent their respective districts and regions. Thirteen CLSCs will represent the OCSE at the regional level. The LAT members for the Office of Adoptions and Division of Aging will represent the interests of the area and local levels. Each local CLSC must accomplish the following:

- serve as single point of contact for each county, district or region on all issues dealing with services to LEP/SI clients,
- keep current and relevant local agency or office LEP/SI policy and procedures for determining language needs of the local service area,
- work with State staff to prepare an assessment report, at least annually, on the language demographics of the local community and the Agency's capacity to meet those needs,

- develop Local Language Assistance Plans if deemed necessary through the self-assessment process, and
- oversee the provision of oral and written language services to clients in accordance with the LEP/SI Policies and Procedures manual.

Responsibilities of the Problem Resolution Team (PRT)

The Department will convene quarterly meetings of the PRT to ensure that all aspects of service delivery to LEP/SI clients remain in compliance with HHS OCR standards. The PRT will offer solutions to programmatic problems facing LEP/SI clients as these problems relate to civil rights and noncompliance issues. PRT members will participate in on-site reviews and provide written notification concerning noncompliance issues to Division and Office Directors. The Directors of Divisions and Offices at the State level will appoint at least one representative to this working committee. Divisions and Offices appointing PRT members include DAS, DFCS, MHDDAD, DPH, DRH, OPGS, OAS, OCSE, OCS, and OIS.

Responsibilities of Citizens Advisory Committee (CAC)

The CAC is comprised of representatives from major ethnic and language groups, including the hearing and visually impaired. The OPGS will convene this CAC quarterly to receive information about actual and perceived service delivery challenges from the customers' and community's perspectives. This group of advisors may play a valuable role in evaluating LEP/SI services and developing community resources and partnerships.

Needs and Resource Assessment

DHR conducted a statewide, self-assessment survey to identify the prominent language groups served by DHR and to determine the extent to which interpreter services are needed for LEP and sensory impaired clients. Through the survey process, DHR implemented the required four-factor analysis of services at the county level. DHR determined the following:

- the number or proportion of LEP persons eligible to be served or likely to be encountered by the program or grantee/recipient,
- the frequency with which LEP individuals come in contact with the program,
- the nature and importance of the program, activity, or service provided by the program to people's lives, and
- the resources available to the grantee/recipient and costs.

The largest language group needing interpreter services are Spanish speaking, representing approximately 70 percent of the LEP population. Estimates of the total LEP population in Georgia based on currently available Census data is over 741,000. Resources used by DHR to communicate include volunteer and paid interpreters from advocacy groups, independent contractors, nonprofit and for-profit corporations, telephone language lines, and departmental employees. Sign interpreters, TTY/TDD lines, Braille and large print are primarily used for the visually and hearing impaired.

This initial self-assessment established a baseline for evaluation of DHR programs and services to LEP and SI clients. In the future, DHR's OPGS will conduct annual assessments of needs and resources based on Census data, agency records and contacts with community organizations.

DHR will record, based on the assessments, the population of the persons eligible to be served or likely to be directly affected by programs and services of DHR. DHR will make projections, where feasible, of the number of clients within that population who are LEP/sensory impaired. DHR will endeavor to record in written form and electronic files the language needs of LEP/sensory impaired clients, including the communication assistance actually provided, and track the cost of providing language support services. This will include the language of the LEP client and method of communication used for the sensory impaired client (e.g., American Sign Language, Braille, etc.). Language assistance would likely be needed at the following contact points:

- Program Intake
- Eligibility Assessments
- Service Plan Development
- Caseworker and Care Coordinator Contacts

- Home Visits
- Field Contacts
- Telephone Contacts.

DHR will identify and develop resources that are needed based on initial and future assessments and specify the location and availability of these resources. DHR will determine the arrangements that must be made to access the resources identified in a timely manner.

The department created a LEP/SI Client Determination Form (Attachment A) that must be completed by all staff utilizing an interpreter, attendant, large print materials, Braille materials or assistive listening devices. Completion of this form is mandatory, even when a DHR employee provides interpretative services. This form will be completed by the DHR service provider on the Internet, in an Excel database, or in Word format. Information captured on this form will be used to analyze DHR's interpreter services. DHR will produce language service reports on a quarterly, semi-annual or annual basis by inputting LEP/SI service information as it is provided. This language service report will serve as the principal self-assessment tool for evaluation purposes.

Language Assistance

DHR must take reasonable steps to ensure that an interpreter is present either by telephone or in person at all points of service delivery. No-cost language assistance offered by DHR will include oral interpreters for foreign languages, written translations for foreign languages, American and other Sign Language interpreters, materials in Braille and large print, and assistive listening devices. DHR and its divisions and offices will use the guidelines set forth in this section to select and evaluate the professional skill level of interpreters and interpretation agencies and organizations desiring to do business with DHR. In all situations, DHR will provide competent interpreters and other language assistance in a timely manner and at no-cost to the DHR customer. If language services are not secured, DHR staff must document all attempts made to obtain an interpreter for the LEP/SI client.

Definitions

An **interpreter** is a highly trained individual who mediates spoken or signed communication between people speaking different languages without adding, omitting, or distorting meaning or editorializing. “The object of the professional interpreter is for the complete transfer of thought behind the utterance in one language into an utterance in a second language” (California Health Interpreters Association – CHIA, 2003). An **interpreter** often is seen as an instrument to bridge the linguistic and cultural gap between service providers and clients and to make their motives transparent to each other. **Interpretation** is the act, process or result of interpreting. **Interpreting** is the process of understanding and analyzing a spoken or signed message and re-expressing that message faithfully, accurately and objectively in another language taking the social and cultural context into account” (CHIA 2003).

A **translator** is a highly trained individual who is able to express, in writing, another language, while systematically retaining the original sense of the document. A **translation** is the conversion of a written text into a corresponding written text in a different language (National Council on Interpreting in Health Care).

A **transliterator** is a person who represents letters or words in the corresponding characters of another alphabet. The term is commonly used to designate a person who transcribes written documents into Braille (American Heritage Dictionary).

Braille is a system of touch reading for the blind, which employs embossed dots evenly arranged in quadrangular letter spaces or cells. In each cell, it is possible to place six dots, three high and two wide.

Assistive technology and **adaptive equipment** for the sensory impaired may include speech to Braille computers, Braille Embossers and text to Braille converter), speech readers, alternative keyboards, TTY/TDD relay lines, etc.

Oral and Written Language Services for LEP Clients

An interpreter and translator must be a conduit, clarifier and cultural broker of information, orally or in written form, rendering in one language what has been conveyed in another with no omissions, editing or polishing, unless necessary to convey meaning within a specific cultural context or to interpret terminology that has no linguistic equivalent. An interpreter may also be an advocate when the needs of the client are not being met due to a systematic barrier such as the complexity of a health care system or racism. The interpreter and translator must communicate with confidentiality, impartiality, professionalism, integrity while ensuring accuracy and completeness within the cultural context of the service provider and client (Diversity RX, January 2002).

Considering the role of the interpreter, translator, and transliterators, DHR will use a range of resources that include the following:

- bilingual staff that are trained and competent in the skill of interpreting,
- outside interpreter services and contractors,
- voluntary community interpreters who are trained and competent in the skill of interpreting,
- a telephone language interpreter service; and
- assistive technology, adaptive equipment, large print, and Braille, for the Sensory Impaired.

Considerations for the type of resources to be used will include the frequency with which staff members are required to communicate program information to clients who speak a primary language other than English or who have a sensory impairment, and the difficulty in securing interpreter services in a timely or cost effective manner.

Directory/Database of Interpreters

The Department of Human Resources will recruit interpreters continually to meet the need for services statewide. DHR will maintain the names and contact information for interpreters according to the geographic areas served by the

interpreters. All interpreters and interpreter services will meet the standards established by the Department according to Federal guidelines. Interpreters falling short of DHR standards will be referred to pre-approved local interpreter training courses. This list or database of interpreters will be updated on a regular basis to ensure accuracy of contact information and distributed to DHR's divisions and offices on a regular basis.

Certified, Qualified and Accredited Interpreters

Federal guidance requires the use of "qualified" interpreters and translators, some of whom may be specialized in a particular field such as "medical." DHR and its divisions and offices will continue to recruit language specialists that meet Federal standards.

A professional interpreter is "**certified**" as competent by a professional organization or government entity through rigorous testing based on appropriate and consistent criteria. Certified interpreters have successfully completed a process by which a governmental or professional organization attests to or certifies that an individual is qualified to provide a particular services (National Council on Interpreting in Health Care, October 2001). Interpreters for the Deaf and hearing impaired must meet the certification requirements of the National Council on Interpreting for the Registry of the Deaf and National Association of the Deaf.

Certification requires a formal assessment, using an instrument that has been tested for validity and reliability, so that the certifying body can be confident that the individuals it certifies have the qualifications needed to do the job.

Interpreters who have limited training or have taken a screening test administered by an employing health, interpreter or referral agency is not considered "certified" (NCIHC, 2001). In all cases, the certification process should be accomplished in accordance with standards of practice that have been established by an extensive network of experts within the field of interpretation.

A “**qualified**” interpreter is a person who successfully passes a relatively narrower and less rigorous testing process than that required to become certified. DHR will deem any person who demonstrates verbal proficiency in English and the language for which they will interpret to be a qualified interpreter if they achieve an accuracy score of 75% or higher on a standard examination administered by the Department. Qualified interpreters will also complete the Department’s or other recognized interpreter training program. Persons meeting these requirements will be listed on the Department’s directory of qualified interpreters.

DHR does not certify, but rather qualifies individuals as interpreters. However, any person may serve as an interpreter for LEP people and be placed on the Department's list of qualified interpreters provided the person:

- is certified pursuant to 28 USC & 1827 (B)(1) or found to be otherwise qualified pursuant to 28 USC & 1827 (B)(2) in the LEP individual’s language by the Director of Administrative Office of the United States Courts,
- is registered in the LEP's language on the register of interpreters maintained by the Commission on Equality of the Supreme Court of Georgia,
- Is currently certified by any state, regional or national interpreting association, board or body as proficient in the LEP individual's language, and
- has participated in DHR’s interpreter training program and has past all related oral and written language skills exams.

NOTE: Some interpreters may be “**accredited**” language specialist. Accreditation is a term usually referring to the recognition of educational institutions or training

programs as meeting and maintaining standards that then qualify its graduates for professional practice (American Translators Association).

Departmental Employees

Any employee of the Department, including county health department staff, who demonstrates verbal proficiency in English and the language for which they will interpret by achieving 75% or more on a standard examination administered by the Department will be deemed a qualified interpreter for persons who are LEP in that language and be entered on the Department's list of qualified interpreters for the specific languages or sensory impairments. DHR is not able to test the skills of interpreters for the deaf and will, therefore, only test the skills of foreign-language speakers.

Professional Standards and Codes of Professional Conduct

Interpreters must abide by DHR's Code of Professional Conduct, which guarantees confidentiality, privacy, fidelity (accuracy), and respect for both the client and provider:

Accuracy. Interpreters/translators shall always thoroughly and faithfully render the source language message, omitting or adding nothing, giving consideration to linguistic variations in both source and target languages, conserving the tone and spirit of the source language message.

Cultural Sensitivity/Courtesy. Interpreters/translators shall be culturally competent, sensitive, and respectful of the individual(s) they serve.

Confidentiality. Interpreters/translators shall not divulge any information obtained through their assignments, including but not limited to information gained through access to documents or other written materials.

Disclosure. Interpreters/translators shall not publicly discuss, report, or offer an opinion concerning matters in which they are or have been engaged, even when that information is not privileged by law to be confidential.

Proficiency. Interpreters/translators shall meet the minimum proficiency standards set forth by the Department by passing approved certification and screening, and evaluation processes.

Compensation. The fee schedule agreed to between the contracted language services providers and the Department shall be the maximum compensation accepted. Interpreters/translators shall not accept additional money, considerations, or favors for service reimbursed by the Department. Interpreters/translators shall not use for private or other gain or advantage, the Department time or facilities, equipment or supplies, nor shall they use or attempt to use their position to secure privileges or exemptions.

Note: Translators and translation services must guarantee that they will not print and distribute DHR materials without the Department's authorization. It is unethical for translators or translation service providers to charge the public for copies of DHR's translated forms and materials.

Non-discrimination. Interpreters/translators shall always be neutral, impartial and unbiased. Interpreter/translators shall not discriminate on the basis of gender, disability, race, color, national origin, age, socio-economic or educational status, or religious, political, or sexual orientation. If the interpreter/translators are unable to perform in a given situation because of cultural issues, the interpreter/translator shall withdraw from the assignment without threat or retaliation.

Self-Evaluation. Interpreters/translators shall accurately and completely represent their certifications, training, and experience.

Impartiality and Conflict of Interest. Interpreters/translators shall disclose any real or perceived conflict or interest, which would affect their objectivity in the delivery of service. Providing interpreting or translation services for family members or friends may violate the individual's right to confidentiality, or constitute a conflict of interest.

Professional Demeanor. Interpreters/translators shall be punctual, prepared, and dressed in a manner appropriate and not distracting for the situation.

Scope of Practice. Interpreters/translators shall not counsel, refer, give advice, or express personal opinions, to individuals for whom they are interpreting/translating, or engage in any other activities, which may be construed to constitute a service other than interpreting/translating. Interpreters/translators are prohibited to have unsupervised access to clients, including but not limited to phoning clients directly.

Reporting Obstacles to Practice. Interpreters/translators shall assess at all times their ability to interpret/translate. Should interpreters/translators have any reservations about their competency, they must immediately notify the parties and offer to withdraw without threat of retaliation. They may remain until more appropriate interpreters/translators can be secured.

Ethical Violations. Interpreters/translators shall immediately withdraw from encounters they perceive as violation of this Code. Any violation of the Code of Professional Conduct may cause termination of the contract.

Professional Development. Interpreters/translators shall develop their skills and knowledge through professional training, continuing education, and interaction with colleagues, and specialists in related fields.

Recruitment and Selection of Interpreters, Translators and Transliterators

DHR will recruit interpreters and translators through the DHR website, county and regional agencies, and community contracts. DHR will advertise interpreter positions continually to secure bilingual candidates for all open positions within DHR and for contract interpreter opportunities. OPGS will maintain and make readily accessible the names and contact information of qualified and/or certified interpreters, including bilingual employees. County and regional offices will submit the names and contact information of interpreters used locally to the OPGS for screening and distribution to DHR agencies and offices statewide.

All interpreters recruited will undergo a criminal background check. Interpreters will participate in DHR's orientation and training. Interpreters who have not participated in a formal training and screening process will be referred to an outside, approved vendor for professional training. Interpreters approved by DHR will provide a photo identification card to DHR staff if requested prior to providing interpretation services.

In the selection of interpreters and translators or a related service, DHR will adopt the following criteria. In all cases, only certified, accredited, and/or qualified interpreters will be used to interpret, translate, or transcribe for DHR's divisions and offices. These professionals will have achieved the following:

- a truthful and accurate account of their training, certification, qualification experience;
- participation in no less than 16 hours of interpreter training offering instruction on professional codes of conduct, standards of practice and procedures, intercultural communication skills, public speaking, and demonstrated knowledge of occupation specific terminology and professional communication styles;

- an accuracy score of 75% or higher on a standard, approved oral English exam;
- an accuracy score of 75% or higher on a standard, approved written native language exam;
- experience in interpreting in at least five situations during the past 12 months, including references; and
- a criminal history clear of felony charges.

In an effort to provide culturally competent services, the interpreter for foreign languages will accomplish the following:

- demonstrate an ability to adapt to the flexible nature of oral communication, including switching subjects without warning and coping with unexpected topics of conversation;
- express willingness to withdraw from situations the interpreter cannot tolerate due to close working situations with colleagues, cultural differences, and clients experiencing very difficult conditions;
- demonstrate a relatively high level of confidence in public speaking situations;
- take into consideration the foreign and English language levels of the client during the interpretation process; and
- abide by the rate schedule and fee agreement described in the contractual agreement between DHR and the language specialist.

DHR will recruit occupation-specific interpreters such as those who are qualified or certified medical interpreters for use in situations involving medical conditions. In all

situations, DHR will consider the health and well being of the interpreter by recognizing that interpreters may need to recover from highly emotional and stressful encounters by taking a brief time-out, securing a new interpreter, or finding resources for emotional support within the boundaries of client confidentiality.

Client Waiver of Right to Free Interpreter Services

DHR recognizes that a client may choose the services of an interpreter, such as a family member or friend, who is not qualified or certified. When this occurs, DHR will ensure informed choice by taking the following steps:

- DHR will inform the client that the department will provide a qualified or certified interpreter at no cost to the client.
- If the client makes an informed choice to use an interpreter, who is not qualified, DHR will have the client sign the "Client Waiver of Rights to Free Interpreter Services" documenting that choice (Attachment B). DHR is not required to cover the cost of the client's interpreter.
- The client's interpreter will sign an acknowledgment of his or her responsibility and provide an oral translation of the informed choice statement to the client.
- These actions will be documented in the client's file with copies of the signed documents.
- DHR may, however, consider securing an independent interpreter to observe the client's "unqualified" interpreter if the communication is vital to the health and well being of the client, if confidentiality is an issue, or if the topic of inquiry involves interpreting highly technical terms or health related issues. In other words, DHR must determine if the agency or client will be jeopardized by not calling an independent interpreter. All explanations and decisions related

to not contacting an independent interpreter must be documented in the client's case file.

- NOTE: The client has the right to reject DHR's offer to hire an independent interpreter to observe the client's interpreter of choice. If rejected, the client must sign the Client Waiver of Rights to Free Interpreter Services, and DHR must document the client's request in the client's file.
- If the independent, qualified interpreter and DHR determine that the client's chosen interpreter is proficient in English and the second language; has sufficient knowledge of the program and is familiar enough and understands commonly used terms and concepts necessary to conduct an effective interview with the client, DHR must fully explained the rationale for utilizing the client's interpreter the client's file.

NOTE: The client may object to having an interpreter participate as an observer in the service process. DHR will respect the client's desire for confidentiality by having the client sign the Client Waiver of Rights form.

Translation of Written Materials

Coordination of translation services will be accomplished through the Office of Policy and Government Services. Hence, all requests for translation services will be submitted to the LEP/SI Coordinator. DHR will implement the following policies as they relate to translation of documents:

- DHR will ensure that select written materials provided in English to program participants will also be provided in other regular occurring languages, including Braille. These materials will be available in hard copy and on the DHR Website when appropriate.

- DHR will determine on a statewide basis the language and sensory impairment groups that constitute a significant percentage of the population in order to determine the languages in which documents will be translated. The OPGS will ensure that vital forms commonly used by all divisions and offices meet basic OCR requirement to be translated into the top five foreign languages spoken in Georgia.
- Each division and office will identify those documents deemed vital to the provision of services. A list of forms and documents will be maintained and reviewed annually by each division and office for inclusion. These documents may include applications, consent forms, letters containing important information regarding program participation, notices pertaining to adverse action, notices of the right to appeal, notifications to LEP persons informing them of free language assistance, and outreach materials normally sent to English-speaking customers or potential customers.
- OPGS will identify appropriate certified and qualified translation services available for translation services.
- Translators and translation services will show evidence of their ability to issue the final copies of translated forms or other documents as “camera ready,” formatted documents in a suitable format for printing or publishing to the DHR website.
- Translators and translation services will ensure the translated text reflects a sound conceptual understanding of the source material; hence, translators will secure a verifiable and independent, certified or qualified translator to proofread the final document. All proofreaders will meet the criteria established for primary translators.
- Translators will take into consideration the foreign language and English literacy levels of the intended audience when translating DHR materials.

- Translators and translation services must return all source documents and related files to the Department with the finished product.
- Occupation-specific translators such as those who are qualified or certified medical interpreters will be used to translate forms containing medical terms.
- Translators and translation services must guarantee that they will not print and distribute DHR materials without the Department's approval.
- It is unethical for translators or translation service providers to charge the public for copies of DHR's translated forms and materials. DHR is to notify translators and translation services of this violation of DHR's Code of Professional Conduct.

Provision of Client Notices and Assurances

DHR will provide effective notice to LEP/SI persons that they have a right to language assistance and that such assistance is free of charge. DHR will develop, post and maintain signs notifying clients of their rights in regularly encountered languages in waiting rooms, reception areas and at other points of intake. DHR will use language identification cards that allow beneficiaries to identify their language needs, as well as waiver of rights forms to enable clients to choose their own interpreter. DHR has developed a wall poster and client assurances form for its divisions and offices, which provide official notice to LEP/SI clients (Attachment C and D).

The Department will also assure clients that DHR will request information (or certification or documentation) regarding citizenship and/or immigration status only when this information is relevant in determining the eligibility of applicants and/or recipients or is required under Federal law. The Department will also notify the client of its policy of nondiscrimination in services and provide the client with contact information with which to file a complaint. DHR has developed the client "Assurances" form to meet this requirement (Attachment E).

Note: DHR will stipulate in contracts or other vendor agreements that interpreter services are to be provided at no charge and that DHR's client assurances will be upheld.

Policies for Service Delivery

When services are delivered to clients, whether by Departmental employees or contract vendors, DHR will ensure the following:

- LEP/sensory impaired customers will be identified as early as possible through the use of "I speak" cards.
- LEP/sensory impaired customers will be informed of their right to request an interpreter at no cost.
- No significant delays will occur in this process.

DHR will ensure that interpreters and/or assistive technology and adaptive equipment are used in the following situations:

- when requested by a customer,
- when requested by a service provider of an LEP/sensory impaired customer,
- when necessary to establish or maintain a client's eligibility for DHR programs or services,
- when interpreter services are necessary to access public meetings sponsored by DHR or those under contract to DHR, and
- when necessary for the customer to access any service funded directly or indirectly by DHR.

Employee Training

DHR will inform all employees likely to have contact with LEP/SI clients of the LEP/SI policies and procedures by disseminating the manual and developing new employee orientation and in-service staff training on LEP and SI issues. DHR will utilize staff trainers and contract professionals to accomplish this goal.

Training will occur during new employee orientation and designated times throughout the year to ensure that employees are knowledgeable regarding the following:

- policies and procedures of language access,
- resources available to determine the language needs of a client,
- resources available to ensure that access is provided in a timely and effective manner,
- working effectively with language interpreters,
- available documents that have been translated into languages other than English, and policies and procedures for "informed choice,"
- cultural Competency, and
- demographics of Georgia.

Interpreter Training

DHR will develop training and an accompanying training manual to "qualify" individuals as social service interpreters for the Department. Training will provide an overview of DHR's programs and services, the Department's professional code of conduct, service "scenarios" commonly encountered by DHR employees and clients, program vocabulary, and cultural diversity issues.

DHR will identify and develop screening and testing tools to determine the English and foreign language skill of the interpreter after they have completed DHR's social service training. Screening and testing of interpreters may be accomplished through contractual agreement with a qualified entity.

DHR will convene semi-annual train-the-trainer sessions to prepare qualified government and non-profit training agencies to offer DHR's social service interpreter training statewide through contractual agreement. DHR will establish guidelines and monitor the registration fees charged by outside entities to provide DHR's social service interpreter training. DHR will advertise training opportunities on its DHR website – www.dhr.georgia.gov "Multicultural Resources."

DHR will make available a list of qualified interpreters for use by the county and regional offices. DHR will notify these interpreters that they are to follow the DHR Code of Professional Conduct and that violations of the Code may result in removal from the DHR list of qualified/certified interpreters.

Information Dissemination

DHR will maintain a website offering information and resources on serving Georgia's multicultural communities (www.dhr.georgia.gov "Multicultural Resources"). This website will contain DHR'S LEP/SI Plan, the policies and procedures manual, a listing of interpreters and language resources, translated forms and materials, training opportunities, ethnic community agencies and media outlets, demographics and cultural competency materials.

Monitoring

DHR will monitor the State LEP/SI Plan on an annual basis to evaluate its effectiveness to ensure language access to LEP/sensory impaired individuals. Reassessment will include the following:

- LEP/SI Populations Served,

- policy and procedures,
- training programs,
- screening process for identifying certified/qualified interpreters,
- translation practices;
- effectiveness of the monitoring process; and
- effectiveness of the Language Access Team, Client Language Service Coordinators, Problem Resolution Team, and Citizens Advisory Committee.

DHR will require each targeted agency or office to submit an annual report of activity by county or region to the OPGS. The report must address each county as a separate entity and include the following:

- the identity of interpreters,
- contracts made to provide language access services,
- language needs in the service area, and
- program monitoring information.

DHR will develop a reporting form (by county) that includes the following:

- total number of LEP/sensory impaired clients receiving assistance,
- number of translators by language category,
- total number of instances, by language category, this service was provided,
- total number of hours, by language category, this service was made available, and
- cost of language services.

DHR will prepare an informational document describing a Problem Resolution Team. This team will assist the department in identifying and offering programmatic problems facing LEP/Sensory Impaired Clients. The document will include the following:

- a description of team functions,
- contact points such as telephone numbers, addresses and individuals to contact,
- forms for addressing complaints,
- time frames for response, and
- a description of the appeals process.

HHS Office of Civil Rights Reporting Requirements

DHR will submit regular progress reports to HHS Office of Civil Rights. This report will describe all activities and services offered by DHR to comply with regulations mandated by HHS OCR to comply with the civil rights laws listed in Section I.

Section III – Immigrant Eligibility to *Federal Benefit Programs*

Introduction

Two welfare reform laws passed in 1996 restricted access to many public benefit programs for low-income immigrants in the U.S. – the Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA - P.L. 104 -193) and the Illegal Immigration Reform and Immigrant Responsibility Act (P.L. 104-208). With the passing of these laws, the rules for determining immigrant eligibility for public benefits became immensely more confusing for both the immigrant and the agencies that provide those benefits. Because of this confusion, some benefit providing agencies have created unnecessary or improper barriers that deter access to immigrant households. In many cases, the barriers deter immigrants or immigrant family members from obtaining benefits that they are eligible for under law. Any such barriers are, at best, poor customer service and, in the worst cases, raise Title VI concerns. Hence, this section of the LEP/SI Policies and Procedures manual provides guidance on immigrant access to public benefit programs to help ensure that all DHR programs do not unnecessarily deter or deny immigrant households from obtaining public benefits

Note: The information contained within this section of the LEP/SI Policies and Procedure manual is intended to compliment related information published in other DHR program policies and procedures manuals. If there is a conflict in policy, please notify the LEP/SI Coordinator at 404/657-5244. All DHR policies and procedures manuals must address services to immigrants in a like manner.

Policy

In an effort to comply with federal law, DHR shall accomplish the following:

- establish fair and nondiscriminatory procedures for applicants to verify immigrant status and eligibility in accordance with the Federal welfare reform and other immigration related laws;
- ensure that eligible persons are enrolled in and have access to federal benefit programs and services by reducing and eliminating access barriers that discourage the enrollment of all eligible program participants, including those in immigrant and mixed-status families;
- review on an annual basis all eligibility processes for its federally funded programs that contain immigration status restrictions and those programs that are exempt from such restrictions;
- scrutinize the eligibility process for DHR programs that have not been designated as “Federal Public Benefits” to ensure that they do not restrict eligibility by immigration status;
- ensure applications and application processes verify an applicant’s status as a U.S. citizen, non-citizen national or qualified alien only when benefits are contingent on such status; and
- inform immigrant applicants about situations that may result in public charge determinations.

DHR is implementing these policies to encourage equal and meaningful access to programs for eligible immigrants.

Federal Benefit Programs and Immigration Status Restrictions

The purpose of this section is to (1) identify which federally funded DHR programs should restrict eligibility by immigration status and which programs should not, (2) define “qualified” and “non-qualified” immigrants, (3) establish procedures for the application and verification process, and (4) offer guidance on public charge issues and Bureau of Citizenship and Immigrant Services (BCIS) reporting requirements.

Under 432 of the PRWORA, providers of a non-exempt “Federal Public Benefit” must verify that the person applying for the benefit is a qualified alien and is eligible to receive the benefit. According to Section 401, aliens who are not “qualified aliens” are not eligible for any “Federal Public Benefit” unless the benefit falls within a specific exemption.

Federally Funded DHR Programs that are not “Federal Public Benefits” for Purposes of PRWORA

PRWORA restricted immigrant eligibility to “Federal Public Benefits”. However, not all Federally funded programs provided by DHR are “Federal Public Benefits” for purposes of the PRWORA immigrant restrictions. The Attorney General Interim Guidance on verification of immigrant status states that benefit providing agencies should NOT verify immigrant status unless they are required or authorized to do so by law. Specifically, that guidance states that if the Federal program does not provide a “Federal Public Benefit” covered by PRWORA, the benefit provider is not required to, and should not attempt to, verify an applicant’s status, unless otherwise required or authorized to do so by law, because all aliens, regardless of their immigration status, are eligible for such benefits. For Federally funded programs, DHR is only authorized to restrict access to programs that have been deemed to be “Federal Public Benefits” for purposes of PRWORA.

The first step that DHR benefit granting agencies must take is to determine if the benefits they provide are “Federal Public Benefits” for purposes of PRWORA

(Annex B). If the benefits you provide are not on this list, then there should be NO restrictions for eligibility on the basis of immigration status. Therefore, if the programs your agency provides are not on this list, you should review your application and application policies and procedures to make sure that there is nothing in them that could deter access for applicants on the basis of immigrant status. Any such restrictions that deter access to otherwise eligible immigrant families could raise serious concerns under applicable civil rights and privacy laws.

Note: DHR division and office directors should maintain a list documenting which programs under their administration are Federal Public Benefits and which are not in order to advise staff if there are immigration restrictions associated with a particular program.

Federal Public Benefit Programs With Immigrant Status Restrictions:

Federal Public Benefit programs that are non-exempt from the immigrant verification process are listed in Annex B and are detailed in HHS Federal Register: August 4, 1998, Volume 63, Number 14, Page 41657- 41661. Not all programs listed in Annex B or the Federal Register are administered by DHR.

While all of these programs provide “Federal Public Benefits,” some benefits or services under these programs may not be provided to an “individual, household, or family eligibility unit” and therefore, do not constitute “Federal Public Benefits” as defined by PRWORA. HHS interprets the phrase “individual, household, or family eligibility unit” to refer to benefits that are (1) provided to an individual, household or family, and (2) the individual, household, or family must, as a condition of receipt, meet specific requirements (e.g., a specified income level or residency (HHS Federal Register: August 4, 1998, Volume 63, Number 14, Page 41657- 41661)).

Therefore, even if your agency finds that it funds programs with Federal funds listed as “Federal Public Benefits,” your should make a determination as to whether or not the programs are provided to individual or family units that must meet specific eligibility requirements. Any Federally funded programs which do not meet those criteria, even if they are funded with grants listed in Annex B, should NOT restrict eligibility by immigration status.

Federal Public Benefit Programs Without Immigration Status Restrictions

Congress created specific exemptions to verification requirements. Therefore, some HHS programs have eligibility requirements in statute but are otherwise specifically exempted under provisions of section 410(b) of PRWORA. Programs that do not require verification of immigrant status are listed in Annex C and are detailed in HHS Federal Register: August 4, 1998, Volume 63, Number 14, Page 41657- 41661. DHR does not administer all programs listed in Annex C.

Under no circumstance, should a program offering the services in Annex C, restrict eligibility by immigrant status. For instance, imagine that DHR set up a flu vaccine program for school children with excess TANF funds. Although TANF is a “Federal Public Benefit” for purposes of PRWORA, vaccination programs are exempt from Immigrant Status restrictions. Therefore this vaccination program, even though funded with TANF dollars, would be an exempt program and not subject to immigrant status restrictions.

The same conditions would apply to MHDDAD programs and services. According to the U.S. Attorney general, specific programs necessary for the protection of life and safety are exempt from immigration status restrictions. These programs include “medical and public health services (including treatment and prevention of diseases and injuries) and mental health, disability or substance abuse assistance necessary to protect life or safety (DOJ “Specification of Community Programs Necessary for Protection of Life or Safety Under Welfare Reform Legislation,” FR Vol. 61, No. 170).

Immigrant Categories Related to Federal Public Benefits Eligibility

Programs that provide a non-exempt “Federal Public Benefit” for purposes of PRWORA must verify immigrant status to determine eligibility. This section details how those programs should verify immigrant eligibility. This section is not relevant to programs, which provide Federally funded programs that are not “Federal Public Benefits” or which are exempt from the immigrant restrictions.

PRWORA changed the factors that agencies must consider in determining whether an immigrant is eligible for benefits. Before 1996, eligibility for benefits depended on whether or not immigrants were present lawfully or unlawfully. For the most part, lawfully present immigrants were eligible for benefits and unlawfully present immigrants were not. Post-1996, those categories are irrelevant for determining eligibility, as some unlawfully present immigrants are eligible for Federal Public Benefits and many lawfully present immigrants are now ineligible.

Now, an immigrant’s eligibility for public benefits currently depends on three factors:

1. The Individual’s Immigration Status
 - “Qualified” Immigrants
 - “Not Qualified” Immigrants
2. When the individual entered the country
 - Entering the U.S. before August 22, 1996
 - Entering the U.S. on or after August 22, 1996
3. If the immigrant has a sponsor
 - Sponsored with the “traditional” Affidavit of Support (I-134)
 - Sponsored with the “enforceable” Affidavit of Support (I-864)

Qualified Immigrants

- **Legal Permanent Resident (LPR).** A person who has been granted legal permanent residence status (a green card holder) and thus is entitled to remain in the United States indefinitely.
- **Refugee.** A person who flees his or her country due to persecution or a well-founded fear of persecution because of race, religion, nationality, political opinion, or membership in a social group and who obtains the status while abroad.
- **Asylee.** A person who has been determined to meet the same requirements as a refugee, but who was already present in the United States at the time he/she obtained asylum.
- **Immigrant who has had deportation withheld.** A person who established that he/she would be likely to face persecution if returned to his/her home country.
- **Immigrant granted parole for at least one year.** The Department of Justice has discretionary authority to permit certain persons or groups to enter the United States in an emergency or because it serves an overriding public interest. Parole may be granted for humanitarian, legal, or medical reasons.
- **Immigrant granted conditional entry.** A person who immigrated based upon a marriage that occurred within two years of obtaining permanent residence.
- **Battered immigrant and her child/children.** This status requires a pending or approved visa petition filed by a U.S. citizen or LPR spouse/parent, a self-petition pursuant to the Violence Against Women Act (VAWA), or an application for cancellation of a removal/suspension of deportation under VAWA, and whose need for benefits has a substantial connection to the battery or cruelty. It also applies to the parent of a battered child and the child of a battered spouse. If an alien can establish that they are “qualified” under this category, then their

immigration status is other wise irrelevant for determining eligibility and it should not be sought or documented.

- Immigrants born in Canada who possess at least 50 percent blood of the American Indian Race, or who are members of certain Indian tribes are qualified immigrants.
- Immigrants who are Cuban or Haitian Entrant (as defined in section 501 (e) of the Refugee Education and Assistance Act of 1980) are qualified.
- **Mandatory Coverage.** State must provide Federal Public Benefits for certain groups of qualified immigrants regardless of their date of entry. Except as noted below, these immigrants are not subject to the five-year bar that applies to immigrants who arrived after August 22, 1996:
 - Refugees are eligible for their first seven years in the U.S.
 - Asylees are eligible for the first seven years after asylum is granted.
 - Victims of trafficking are eligible.
 - Immigrants whose deportation has been withheld are eligible for the first seven years from the date withholding is granted.
 - Cuban and Haitian Entrants are eligible for the first seven years in the U.S.
 - Amerasian immigrants are eligible for the first five years in the U.S.
 - Honorably discharged U.S. military, active duty military personnel and their spouses, and unmarried dependent children (regardless of date of entry) are eligible.

- Legal Permanent Residents who enter the country after August 22, 1996 are subject to the five-year bar. However, once they have been in the country for five years and have 40 credited work quarters of coverage under the Social Security Act, they too must be covered, provided they received no Federal Means-tested Public Benefits in any such qualifying quarter for any period beginning after December 31, 1996. Generally, these are people with a ten-year work history.
- **“Not Qualified” Immigrants.** Not qualified immigrants are not eligible for federal public benefit programs, except in emergencies and include all other non-citizens, such as (NILC, 2002):
 1. Persons Residing Under Color of Law (PRUCOL) including the following:
 - immigrants granted indefinite voluntary departure,
 - immigrants residing in the U.S. under orders of supervision,
 - immigrants who have lived in the United States continuously since January 1, 1972,
 - immigrants granted stays or suspension of deportation,
 - applicants for asylum and family unity,
 - applicants for adjustment of status, and
 - other immigrants whose departure the INS does not contemplate enforcing.
 2. Undocumented immigrants
 3. Non-immigrants such as students and foreign visitors.

New Entrants – Special Rules for Immigrants Who Arrive in the U.S. After the PRWOA

Immigrants who arrive in the United States on or after August 22, 1996, are barred from receiving TANF, Medicaid, SSI, Food Stamps, and Peachcare for Kids for the first five years after they enter the country with a qualified status. (See prior section on Mandatory Coverage for exceptions to this rule).

Under legislation passed on 2002, Food Stamps benefits were restored to all eligible, legal children, regardless of their date of entry to the U.S., without sponsor deeming. Food Stamps for legal immigrants who have been in the U.S. for five years are restored, with sponsor deeming after the five-year period. The new Food Stamp legislation restore eligibility to disabled legal immigrants who enter the U.S. after August 22, 1996, and receive disability benefits such as SSI. Full eligibility for refugees and asylees is provided under the provision that restores eligibility after five years of residence (Rosenbaum, 2002). Immigrant's eligible for SSI include the following:

- persons receiving SSI on 8/22/96, or whose SSI applications were pending on that date;
- persons who are blind or have disabilities, who were lawfully residing in the U.S. on 8/22/96, and are now “qualified” immigrants;
- LPR who are credited with 40 quarters of work. (LPRs who physically entered the U.S. on or after 8/22/96 must have been in qualified status for at least five years);
- refugees, asylees, persons granted withholding of removal/deportation, Amerasian immigrants, and Cuban Haitian entrants during the first seven years after obtaining status;

- victims of trafficking;
- veterans and active duty military personnel, their spouses, un-remarried surviving spouses, and children, who are “qualified” immigrants; and
- a member of a federally recognized Indian tribe or American Indian born in Canada.

SSI and the Medicaid Program. While DHR does not administer SSI, SSI is relevant to the Medicaid program. An immigrant can only receive SSI (and therefore Medicaid) if he or she was receiving SSI on August 22, 1996. An immigrant who was not receiving SSI on August 22, 1996, can establish eligibility for SSI and therefore Medicaid if he or she (a) is a qualified immigrant, (b) was legally residing on August 22, 1996, and (c) meets the SSI disability standard at the time of application.

Elderly immigrants (age 65 or over) who are qualified immigrants and meet the SSI income and resource standards but who are not disabled are not eligible for SSI. However, depending on income and resources, an elderly qualified immigrant may qualify for Medicaid under an optional Medicaid eligibility category (Schlosberg, 2001). (See Mandatory Coverage Section for exceptions to this rule).

Public Charge Determinations and Public benefits

“Public charge” is a term used by the Bureau of Citizenship and Immigration Services, the Immigration Court, and the U.S. State Department to refer to persons who are considered primarily dependent on the government for subsistence. Prior to 1996, these determinations had nothing to do with the receipt of public benefits. In the confusion that followed the 1996 laws, some INS officials began linking the receipt of public benefits to these public charge determinations.

Many immigrants who used Medicaid or whose children were on Peachcare, were incorrectly told that they were public charges and could not change their immigration status or re-enter the country unless they repaid the government. Fear of Public Charge has dramatically affected the willingness of immigrant households to participate in public benefit programs that they are eligible for. It is of vital importance that all staff understand whether or not receipt of the benefit they provide can affect public charge determinations so that they can alleviate fear or provide accurate information to immigrant households.

For example, many legal immigrants fear that if they receive various public benefits, the BCIS or State department will decide they are likely to become a “public charge.” All immigrants seeking admission to the United States or adjustment of status must pass public charge scrutiny. If found to be a public charge, immigrants may be denied a visa to enter the United States, denied re-admission to the U.S. after a trip abroad for more than six months, or in very rare circumstances, enter into deportation proceedings.

Fear of any of these consequences has kept many legal immigrants from accessing benefits for which they are eligible (Fremstad, 2000). In some cases, legal immigrants have used false names and social security numbers when applying for benefits so as to influence their access history. The BCIS considers the “totality” of circumstances such as cash benefits, age, health, family status, assets, resources, financial status, education, skills, and whether an Affidavit of Support exists, among other factors (Fremstad, 2000). In an effort to overcome the “public charge” fears of eligible persons who live in immigrant families, DHR make every effort to address the concerns of immigrant applicants about participating in public assistance programs such as, TANF, Medicaid, SCHIP, and Food Stamps.

The BCIS put out guidance clarifying when receipt of public benefits can affect public charge determinations. The only public benefits that will be considered in making public charge determinations are receipt of public cash assistance for income maintenance or institutionalization for long-term care at government

expense. Benefits that may be considered in public charge determinations include:

- SSI;
- TANF, but not including TANF cash payments for specific supplemental purposes, such as childcare, transportation, or job training;
- state and local cash assistance programs for income maintenance (such as General Assistance); and
- institutionalization for long-term care (e.g., in nursing home or mental health institution) at government expense.

Under the new Federal BCIS guidance, the receipt of any non-cash benefit, with sole exception of institutionalization for long-term care at government expense, is never a factor in public charge determination. Generally, public charge does not apply to the following:

- citizens or persons applying for citizenship
- “Green Card holders” - Legal Permanent Residents (unless they leave the country for more than 6 months)
- Lawful Permanent Residents whose U.S. work history, or whose spouse’s or parent’s work history, added to theirs, totals forty qualifying quarters
- refugees or persons granted asylum in the U.S.
- Cuban or Haitian entrants - Persons applying for adjustment of status under the Haitian Refugee Immigration Fairness Act of 1998
- Cubans or Nicaraguans applying for adjustment of status under the Nicaraguan Adjustment and Central American Relief Act of 1997 (NACARA)

- Cubans applying for adjustment under the Cuban Adjustment Act who were paroled as refugees prior to April 1, 1980
- victims of trafficking
- VAWA (Violence Against Women Act) applicants
- immigrants who have served or whose family members have served in the U.S. military (“veterans’ exception”)
- Amerasian immigrants when they are first admitted to the U.S.
- “Lautenberg” parolees (certain Soviet, Polish, Hungarian, Lauderburg, and Indo-Chinese parolees applying for adjustment)
- registry applicants (persons in the U.S. since before January 1, 1972)
- special immigrant juveniles.

NOTE: Cash payments that are earned are not considered in the public charge determination (Social Security benefits, pensions, veteran’s benefits). Use of cash assistance by an immigrant’s child (e.g., SSI received by a disabled child) will not be considered in the public charge determination unless the family is relying on the cash assistance.

Affidavits of Support and Sponsor Deeming

Although immigrants are no longer barred from receiving Federal Means tested Public Benefits after the five year bar, many likely will remain ineligible if States chose not to provide benefits and or because of the new rule on sponsor-to-immigrant deeming of income (NILC, 2002). The Affidavit of Support is used for deeming purposes to determine the level of economic support provided to the immigrant.

The Affidavit of Support (AOS) is a form completed by the sponsors of most prospective immigrants who are applying for lawful permanent residency in the U.S. In the AOS, the sponsor promises to economically support the sponsored immigrant. There are three different AOS forms, and each is governed by a different set of rules (NILC, 2002):

(1) The “traditional” AOS (Form I-134) is optional was the principal form used before December 19, 1997, and is still used for several categories of immigrants.

(2) The “enforceable” AOS (Form I-864) is mandatory for most family-based immigrants who apply for an immigrant visa after December 19, 1997.

(3) Another type of “enforceable” AOS (Form I-361) must be submitted with a petition for treatment as an Amerasian for certain nationals of Korea, Vietnam, Laos, Kampuchea, or Thailand born after 1950 and before October 22, 1982.

Some Immigrants are not required to have sponsors or their sponsors do not have to sign an AOS. This group of immigrants includes the following:

- refugees and asylees applying for LPR status;
- applicants for adjustment of status under certain specific programs, including registry (based on residence in the U.S. since before January 1, 1972), the Nicaraguan Adjustment and Central American Relief Act (for eligible Cubans and Nicaraguans), the Haitian Refugee Immigration Fairness Act (for eligible Haitians), the Cuban Adjustment Act, certain Indochinese, Polish and Hungarian parolees, and persons applying as special immigrant juveniles; and
- individuals applying for cancellation of removal or suspension of deportation.

Under immigrant sponsor deeming, the income and resources of an immigrant's sponsor (and the sponsor's spouse) are considered, or “deemed” to be available to the sponsored immigrant when he or she applies for certain public benefits. Deeming generally does not apply to immigrants who are not required to have an affidavit of support on file (e.g. refugees, asylees, parolees, and abused spouses/children who file a “self-petition” for an immigrant visa). The only Federal programs that may impose immigrant sponsor deeming are FS, TANF,

Medicaid (but not Emergency Medicaid), Peachcare for Kids (SCHIP), and SSI. DHR cannot impose deeming rules in any other federally funded program.

The deeming period begins on the date the immigrant becomes an LPR and ends when the LPR becomes a citizen or secures credit for 40 quarters of work. Most immigrants who physically enter the U.S. on or after August 22, 1996, are ineligible for federal means-tested public benefits until they have been in “qualified” immigrant status for at least five years. Therefore, federal deeming rules do not affect most immigrants with enforceable AOS until after the expiration of this five-year bar on their eligibility.

NOTE: In the Food Stamp Program, if the immigrant is not eligible for benefits, his or her sponsor’s income and resource are not deemed to the other household members. Effective October 1, 2003, children receiving food stamps will not be subject to deeming (NILC, 2002).

Determination of Indigence For the Food Stamp Program

An eligible sponsored alien is indigent if the sum of all the sponsored alien’s household’s income and any assistance the sponsor or others provide (cash or in-kind) is less than or equal to 130 percent of the poverty income guideline. Unlike a normal determination of income for food stamp eligibility purposes, the indigence determination includes an estimation of value of in-kind assistance the sponsor and others provide. DHR would determine the amount of income and other in-kind assistance provided in the month of application. Each indigence determination is good for 12 months and is renewable for additional 12-month periods. If the sponsored alien were indigent, then the normal food stamp budgeting process would begin. DHR must count in the food stamp budget whatever actual cash contributions the sponsor and others provide (FR Vol. 65, No. 225, November 21, 2000).

Immigrant Status Determination

Title IV of the PRWORA provides that, with certain exceptions, only United States citizens, United States non-citizen nationals and “qualified aliens” (and sometimes only particular categories of qualified aliens) are eligible for Federal, Public Benefits (62 FR 61344-02). DHR programs that have determined that they provide non-exempt Federal Public Benefits must determine satisfactory immigration status of an applicant by self-proclamation, using the SAVE system, or establishing their own verification procedures. DHR allows the applicant to “self-proclaim” their status for all designated programs except Federal means-tested programs (TANF, non-emergency Medicaid, Food Stamps and Peachcare for Kids). All Federal means-tested programs must determine citizenship and immigration status by either using the SAVE System or viewing immigration documents.

DHR must establish immigration status according to amendments to PRWORA by the Illegal Immigration Reform and Immigrant Responsibility Act of 1996 (IIRIRA), which requires the Attorney General to establish fair and nondiscriminatory procedures for applicants to provide proof of citizenship. It is important to remember that although PRWOA limits the benefits available to some aliens, many aliens will continue to be entitled to receive public benefits. If improperly applied, the Act’s restrictions may result in national origin discrimination against applicant’s who are eligible to receive benefits. It is therefore important to understand which aliens are eligible for which benefits.

When applying for any type of public benefit program, an individual often must divulge sensitive information about themselves or others as a part of the eligibility process. For immigrants who fear immigration sanctions and other repercussions, sharing immigrant documents and social security numbers without fully understanding how this information will be utilized may discourage eligible applicants from applying for public benefit programs. U.S. citizen children and other eligible persons who live in immigrant families still may be deterred from applying for benefits because they are concerned about responding to

certain questions on application forms regarding the disclosure of immigration status and social security numbers for family members who are not seeking assistance.

Under federal law, DHR is required to establish the citizenship and immigration status of applicants for federal means-tested programs such as Medicaid (except emergency Medicaid), Peachcare for Kids, TANF and Food Stamps. However, DHR may not require applicants to provide information about the citizenship or immigration status of any non-applicant family or household member or deny benefits to an applicant because a non-applicant family or household member has not disclosed his or her citizenship or immigration status.

Thus, for example, in the Medicaid program, if benefits are being sought only for the child, the child is considered the “applicant,” and DHR is required to establish the citizenship and immigration status of the child, but not the child’s parents. Further, DHR may not deny benefits to the child, if otherwise eligible, because the child’s parents have not provided information to establish that they are citizens or qualified immigrants.

Application Requirements and Inquiries Regarding Social Security Numbers

DHR must comply with the Privacy Act and other federal laws when seeking disclosure of an individual’s SSN. Under the Privacy Act, § 7(a), states are prohibited from denying an individual any right, benefit, or privilege provided by law because of the individual’s refusal to disclose his or her social security number (SSN) unless such disclosure is required by federal statute, or the state maintains a system of records in existence and operating before January 1, 1975, and the disclosure of the SSN was required under statute or regulation adopted prior to that date to verify the identity of an individual.

Where DHR is not authorized to require an individual to disclose his/her SSN, DHR may request that individuals voluntarily provide SSNs.

However, under the Privacy Act, any time a DHR requests an individual to disclose his or her SSN, DHR “shall inform that individual whether that disclosure is mandatory or voluntary, by what statutory or other authority such number is solicited, and what uses will be made of it.” (Privacy Act of 1974 § 7(b)). Thus, in the Medicaid example cited earlier in Section I, states can ask non-applicant parents for their SSNs to verify income, but to avoid a potential violation of the Privacy Act, they must clearly indicate that the provision of this information is voluntary and that their SSNs will be used, for example, only to verify their income. DHR also should inform the non-applicant parents that the failure to provide their SSNs voluntarily would not affect the eligibility of their child, if otherwise eligible.

The Privacy Act, as a general rule, prohibits DHR from denying program benefits to certain applicants who do not disclose their SSNs if the disclosure is not required by federal statute. In addition separate and apart from the Privacy Act prohibitions, Medicaid, Peachcare for Kids (SCHIP) and Food Stamp laws and federal policies prohibit states from denying benefits to an applicant because of the failure of another household member to disclose his or her SSN. Because of differences among the Medicaid, SCHIP, TANF and Food Stamp programs, the specific rules and procedures for each program with regard to SSN inquiries are set forth in detail by program below.

Emergency Medicaid and Verification of Immigrant Status

Special rules apply to Medicaid coverage for emergency services. Emergency Medicaid coverage is limited to treatment required after the sudden onset of a medical condition (including labor and delivery) manifesting itself by acute symptoms of sufficient severity (including severe pain) such that the absence of immediate medical attention could reasonably be expected to result in – (a) placing the patient’s health in serious jeopardy, (b) serious impairment to bodily functions, or (c) serious dysfunction of any bodily organ or part.

Citizenship and Immigration Status and *Emergency Medicaid*.

If a non-citizen, who is not eligible for regular Medicaid, qualifies for emergency Medicaid coverage, by law, the applicant is not required to declare or provide proof of his or her immigration status. DHR may not deny benefits based on an applicant's failure (or that of a person acting on behalf of the applicant) to certify or document his or her citizenship or immigration status or the citizenship or immigration status of any other person or persons in the applicant's household (Social Security Act § 1137(f); 42 U.S.C. § 1320b-7(f)).

Social Security Numbers and *Emergency Medicaid*. If a non-citizen, who is not eligible for regular Medicaid, qualifies for emergency Medicaid coverage, the applicant cannot be required to provide an SSN. DHR may ask for an SSN if they clearly inform the applicant that provision of this information is voluntary, and if they state how the information will be used. DHR may not deny emergency Medicaid benefits because a non-citizen does not provide his or her SSN or the SSN of anyone else in the applicant's household (Social Security Act § 1137(f); 42 U.S.C. § 1320b-7(f)).

Division and Office Directors must examine its applications and policies and procedures to make sure that DHR is not requiring citizenship/immigration status of non-applicant household members or SSNs from non-applicant household members. Also, if requiring SSNs for non-means tested programs, DHR must determine if the request is allowable under the Privacy Act. If DHR cannot or is not sure if SSNs may be requested, DHR must ensure that all applications and policies and procedures clarify that the provision of SSN is voluntary for applicants and non-applicant household members.

Applicants With Disabilities and Nondiscrimination. If an applicant has a disability that limits the applicant's ability to provide the required evidence of citizenship or nationality (e.g., mental retardation, amnesia, or other cognitive, mental or physical impairment), you should make every

effort to assist the individual to obtain the required evidence. In addition, you should not discriminate against applicants on the basis of race, national origin, gender, religion, age or disability.

SAVE (BCIS Systematic Alien Verification for Entitlements Program)

DHR is to contact the BCIS Systematic Alien Verification for Entitlements Program (SAVE) for all applications for TANF, non-emergency Medicaid and Food Stamp programs unless the status was previously determined and documented in the SUCCESS System. The SAVE enables Federal, state and local government agencies to obtain immigration status information as needed in order to determine an applicant's recipient's eligibility for many public benefits. The Immigration Reform and Control Act of 1986 (IRCA) and PRWORA mandate the following programs and overseeing agencies to participate in the verification of an applicant's immigration status:

- TANF (HHS)
- Medicaid (HHS)

Non-mandated agencies relevant to DHR that participate in the SAVE program include the Food Stamp Program, Social Security Administration and Federal Emergency Management Agency.

The SAVE program can electronically verify the status of most lawful residents as well as aliens in many other categories. Copies of documents must be sent to BCIS for further verification for certain groups of aliens or when status cannot be verified immediately through the automated system. This additional verification ensures that all available BCIS records systems can be checked and that benefits are not denied to eligible persons.

DHR staff may access the SAVE system to verify immigrant status on all applications unless previously determined and documented in the SUCCESS system. The access number for SAVE is 1-800-365-7620. Staff must provide the county code and program for which the client is applying. When contacting SAVE, staff may be required to initiate a secondary verification by forwarding copies of the client's documentation to the following address:

Attention: "Status Verifier"
U.S. Immigration and Naturalization Service (BCIS)
77 Forsyth Street SW
Atlanta, Georgia 30303

Expect a response from BCIS in six to eight weeks. DHR is able to approve receipt of services for up to six months without SAVE verification.

NOTE: A negative SAVE response should not be used as a requirement for reporting an alien to BCIS.

Mandatory Reporting

In administering the TANF block grants and Food Stamps, DHR must report to BCIS on a quarterly basis the name and other identifying information of applicants to TANF and Food Stamps that the agency "knows" are not legally present in the United States (The Access Project). NO OTHER PROGRAMS WITHIN DHR HAVE THE OBLIGATION TO REPORT TO BCIS AND SHOULD NOT DO SO because of the danger of infringing on Privacy and Civil Rights.

The TANF and Food Stamp Programs are not to assume the role of "enforcing" federal law as they fulfill Section 404 of PRWORA. The finding or conclusion as to immigration status made by DHR does not have any weight outside the context of the alien's eligibility for that particular benefit. Determination of status for purposes of the Immigration and Nationality Act are the responsibility of the Department of Justice, not any other agency.

The TANF and Food Stamp Programs are not required to make quarterly reports to the BCIS unless it “knows” an individual who is not lawfully present in the United States. An entity will “know” that an immigrant is not lawfully present in the United States only when the unlawful presence is a “finding of fact or conclusion of law” that is made by the entity as part of a formal determination that is subject to administrative review. Furthermore, the agency will only “know” the status of an applicant for any of the statutorily specified programs mentioned above (i.e. TANF and FS). Again, this reporting does not apply to any other programs administered by DHR.

In addition, the finding or conclusion of unlawful presence must be supported by a determination by BCIS or Executive Office of Immigration Review, such as a Final Order of Deportation. A SAVE response showing no service record on an individual or an immigration status making the individual ineligible for benefit is not a finding of fact or conclusion of law that the individual is not lawfully present. A mere statement by an individual that they are unlawfully present is also insufficient to make a finding of lawful presence for purpose of the reporting requirement.

Simply put, if an alien applies for TANF or Food Stamps without documentation verifying that they are qualified to receive the benefit, DHR must explain the eligibility requirements for federal benefit programs to the alien, thus allowing the alien to choose to be a non-applicant who may apply for assistance for other family or household members who are qualified. DHR must further explain that a person has the right to apply for Emergency Medicaid, which is available to illegal aliens. These options should be explained to the individual so that she/he can make an informed choice as to whether or not to be an applicant or a non-applicant.

DHR is not to report the alien to the BCIS if the alien lacks documentation or if the alien states that they are undocumented. Those persons should simply be classified as non-applicants, however, any family members who are qualified immigrants or citizens should be allowed to apply for and receive the benefit.

If DHR receives or has documentation from BCIS that an alien who is applying for or receiving TANF or Food Stamps is unlawfully present, DHR should not report that person to the BCIS. Instead, DHR must first review the documentation and allow the subject to respond to the allegations before DHR can establish a “finding of fact and conclusion of law” that the alien is unlawfully present. After receiving the authorized account of the alien’s unlawful status, DHR will officially report the alien recipient to BCIS. Aliens will not be referred to the BCIS unless the following occurs:

- The alien presents documentation that he/she is an illegal alien (such as a formal order of deportation).
- The alien’s unlawful presence status has been determined through the TANF and Food Stamp review process, which involves allowing the applicant an opportunity to present the appropriate documentation and receive formal notification from BCIS of the alien’s unlawful status.

References

This policy section is comprised of direct excerpts from the following sources:

- Fremstad, Shawn. (January 7, 2000). The INS Public Charge Guidance: *What Does it Mean For Immigrants Who Need Public Assistance?* Center for Budget and Policy Priorities.

Food Stamp Program: Non-citizen Eligibility, and Certification Provisions of Pub. L. 104-193, as Amended by Public Laws 104-208, 105-33, and 105-185: Final Rule. (November 21, 2000). USDA Federal Register 65, Volume Number 225).

- HHS Notice: Personal Responsibility and Work Opportunity Reconciliation Act of 1996: Federal Public Benefit Interpretation; Notice Eligibility for Public Benefits. (August 4, 1998). Federal Register Volume 63, Number 14, Page 41657-41661.

- HHS Policy Guidance Regarding Inquiries in to Citizenship, Immigration Status, and Social Security Numbers in State Applications for Medicaid, SSHIP, TANF, and Food Stamp Benefits. (September 21, 2000). US HHS and USDA.
- Interim Guidance on Verification of Citizenship, Qualified Alien Status and Eligibility Under Title IV of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996. (November 17, 1997). Federal Register Volume 62, page 61344.
- National Immigration Law Center. (2002). *Guide to Immigrant Eligibility for Federal Programs 4th Edition*. Los Angeles, California.

Note: Guide to Immigrant Eligibility for Federal Programs, 4th Edition, is a valuable resource for dealing with immigrant access issues to Federal Public Benefit programs. Each division and or office at the State and county would benefit from having a copy for future reference.

- Schlosberg, Claudia. (2002). *Immigrant Access to Health Benefits: A Resource Manual*. Prepared for the Access Project and National Health Law Program.
- Rosenbaum, Dorthey. (May 1, 2002). *Nutrition Provisions of Final 2002 Farm Bill.* Center on Budget and Policy Priorities.
- Specification of Community Programs Necessary for Protection of Life or Safety Under Welfare Reform Legislation. (August 30, 1996). Federal Register Volume 61, No. 170.
- The Legal Aid Society Civil Appeals and Law Reform Unit. (May 19, 2003). *An Advocate's Guide to Government Benefits for Immigrants*. New York, New York.

Section IV - DHR's Procedures for Taking Reasonable Steps Toward Providing Meaningful Access to Services for LEP/SI Clients

Preparing for Delivery of Services

DHR is committed to providing certain core services and basic information at each division or office offering direct services to LEP and SI clients. Hence, the core components available at each service delivery site must include the items listed on the Service Delivery Site Checklist (Attachment F).

Service Delivery Site Checklist

OPGS has created a "Service Delivery Checklist" for supervisors, managers and administrators to use when evaluating the ability of each service point to provide meaningful access to LEP and SI clients. The "Service delivery Checklist" is included as Attachment F. This checklist and all related forms with translations are also available at www.dhr.georgia.gov "Multicultural Resources." To provide meaningful access to services, the DHR service site must equip sites with the following:

- a copy of the State LEP/SI Plan (Annex A) and accompanying LEP/SI Policies and Procedure manual conveniently located and accessible for reference to all DHR staff,
- the LEP/SI Client Determination Forms or instructions for computer access to this form at each in-take area (Attachment A),
- a "designee" for entering all LEP/SI Client Determination Forms into the DHR database system,

- copies of the “I Speak” Census Bureaus card, which accommodates the identification of 30 languages likely to be encountered by DHR staff (Attachment D),
- copies of “Client Waiver of Right to No-Cost Interpreter Services” forms translated available in multiple languages at each in-take area (Attachment B),
- a sign notifying clients in at least ten languages of their right to no-cost language services and identifying language spoken (Attachment C). This sign must be posted in all waiting room areas,
- client “Assurance” Forms available in multiple languages in the waiting areas of service delivery sites (Attachment E),
- a sign posted in each intake area identifying the Client Language Coordinator and Language Access Team Member for each division and office as well as the OPGS LEP/SI Coordinator documenting; the computer link to the LEP/SI Client Determination Form, the DHR LEP/SI Multicultural Resources website (www.dhr.georgia.gov “Multicultural Resources,” including language resources; and commonly used language and TTY/TDD lines and contract interpreter numbers),
- a list of interpreter and telephone language line contact information, and
- a list of translated materials by title, form number and language.

Employee Orientation and Training

Supervisors and managers must prepare all staff to provide meaningful access to services by informing employees about procedures for accessing language services, payment options for interpreters, and the agency’s internal payment process. Having this basic information will enable DHR employees to offer timely

service to DHR clients, as well as maintain a level of professionalism in service delivery.

New Employee Orientation:

Services to LEP and SI clients will be introduced at new employee orientation. Because time is limited during new employee orientation, a general overview will be provided and staff instructed to review the policies and procedures manual as a part of new worker orientation. Extended training will occur during in-service training sessions.

In-service Training:

All staff of the Department and County Boards of Health must become familiar with the LEP/SI Policies and Procedures manual. This manual incorporates the State LEP/SI Plan; therefore, by reviewing this document, staff will become familiar with the State LEP/SI Plan. The OPGS working with the LAT and CLSC will offer in-service training and technical assistance to supervisors and staff providing direct services to LEP/SI clients through scheduled training at DHR's Atlanta and Macon training sites. Classes offering technical assistance about serving LEP/SI clients will be advertised through DHR's OHRM and coordinated with DHR's Diversity training efforts.

In-service training of CLSC and supervisors will be provided annually by OPGS in conjunction with the LAT and PRT members. Divisions and Offices may also request on-site training by calling the LEP/SI Coordinator at 404/657- 5244.

After successfully completing training, CLSCs may serve as the primary point of contact for LEP/SI concerns at the local level. CLSC will then relay LEP/SI concerns to their LAT representative, who then notifies the LEP/SI Coordinator, that further action if necessary.

The OPGS will make available other specialized in-service training instructing employees about how to use interpreters successfully. These courses will be offered periodically throughout the year at the Atlanta and Macon training sites.

Interpreter Training

DHR is required to utilize qualified and/or certified interpreters and translators. Currently in Georgia, interpreter training is available for legal, medical and law enforcement situations. DHR will develop social service training for interpreters in 2004. By attending the social service training and successfully passing the screening and testing phase, DHR will qualify its interpreters to communicate in social service situations. DHR will provide bilingual employees the opportunity to participate in social service training.

Service Delivery Procedure (Initial)

The first step in DHR's service delivery procedure involves determining whether the client needs an interpreter. DHR staff should consider the technical level of communication that will occur between caseworker and client when determining if a client needs an interpreter. While LEP's may be able to state their name and address, they may not be able to understand basic instruction and technical or medical terms. LEPs who are able to communicate with basic information may provide a negative response to your question, "Do you need an interpreter?" DHR staff must nonetheless secure an interpreter if detailed instruction or technical or medical terminology will be used during the interpretive session.

The second step involves "identifying" the language spoken by the client or the client's sensory impairment. This may be accomplished by the following:

- showing the client the U.S. Census Bureau 'I Speak' card with Braille attachment (Attachment D) or

- referring to the wall poster (Attachment C).

After determining the interpretive services required, and securing these services, DHR staff must begin completing the LEP/SI Client Determination Form (Attachment A) and Client Waiver of Rights to Free Interpreter (Attachment B) if the client chooses to use their own interpretive resources. The LEP/SI Client Determination Form is used only when a client is identified as being LEP or SI. This form is not to be used for every person seeking services from DHR.

LEP/SI Client Determination Form

The client determination form must be completed during the intake process to formally identify the LEP/SI client, document services provided to the client, and calculate the cost of services. The LEP/SI Client Determination Form is available in Word or Excel; however, DHR would like staff to complete the Internet database version as primary method of collecting client information about language access. These forms and database are located at **www.dhr.georgia.gov** “Multicultural Resources.” Form instructions are located on its backside and on the DHR website.

All hand written LEP/SI Client Determination forms must eventually be entered into the DHR Internet language database. All forms completed in Word or Excel must be forwarded to the designated CLSC or to the person to enter this data on behalf of the service agency. A copy of the LEP/SI forms must be kept in each client’s case, the file.

For on-site interpretation sessions, DHR staff and the interpreter must sign the LEP/SI Client Determination Form to verify the time spent communicating. The client determination form must also be used to document telephone service, however, Language Line providers may request each agency to also complete a Language Line Call Log (Attachment G).

The agency or division may utilize the client determination form for requesting interpretive services, confirming scheduled appointments, verifying the interpreter's time and cost of service when paying the interpreter's invoice for services, and evaluating the interpreter's performance.

Waiver of Rights to Free Interpreter Services Form

DHR staff must never instruct a client to bring his or her own interpreter. DHR and its contractors are required to arrange for and pay the cost of interpretive services for LEP/SI clients. If a client desires to use a non-DHR interpreter, DHR is not responsible for paying the cost of the client's interpreter of choice.

To clarify this policy, the DHR staff person must ask the client to sign the "Client Waiver of Rights to No Cost Interpreter Services (Attachment B)". This form is available in several languages. If the waiver of rights form is not available in the client's language, DHR staff must arrange for an interpreter to orally translate the content of the waiver prior to obtaining the client's signature.

DHR must arrange and pay for the cost of an interpreter to observe the interpretive session of the non-qualified/non-certified interpreter chosen by the client. This procedure may be dismissed if the client believes his or her privacy is at risk by DHR calling a qualified interpreter to observe the interpretive session.

Client Assurances

In an effort to inform the client of his/or her rights and offer the client a clear process with which to file a complaint, DHR will make available client "Assurance" forms in multiple languages (Attachment E). These forms must be displayed in DHR waiting rooms and intake areas. If an Assurance form is not available in a particular language, DHR must utilize an interpreter to explain the Department's policies to the individual questioning the application process or requesting information about the complaint process.

Securing and Utilizing Oral Interpretive Services

After the DHR staff person identifies and documents the language spoken or interpretive services needed, they must take reasonable steps to secure appropriate communication resource in a timely manner. For walk-ins, a DHR interpreter should respond by telephone within an hour. On-site interpretation services should be scheduled at least 48 hours in advance. DHR may also schedule telephone sessions with interpreters using the same criteria.

If an interpreter is not obtained, DHR staff must document the steps taken to secure an interpreter. This documentation must be filed in the client's case records should the Office of Civil Rights question DHR's efforts to secure language services. The OPGS may also review such documentation during regular on-site reviews.

Interpreters will charge various rates for their services. Attachment I documents the average hourly rate charged by interpreters in Georgia for the primary languages spoken. This list may be used to negotiate the hourly rate of pay for interpreter services. Interpreters listed in the DHR website have agreed to charge a reasonable rate for service based on the following guidelines:

- Interpreters may negotiate a two-hour minimum charge per on-site session not to exceed more than \$40 per hour. Budgetary constraints of each local division and office requesting service should be taken into consideration.
- Interpreter will negotiate the rate for on-site services and agree upon the rate prior to delivering services.
- Interpreter will not charge more than .65 per minute for telephone service in addition to receiving a basic fee of \$10.00 per call.

- Interpreters will not request reimbursement for mileage, meals, and lodging or other travel expenses unless pre-approved for interpretative sessions requiring an overnight stay.
- In the case of a client's missed appointment or any other situation, interpreters shall not charge for services not delivered. (The requesting division or office may consider increasing the interpreter's pay for the interpretative session that follows a client "no-show" situation as a good faith effort to retain the services of the interpreter).
- Upon request, prior to providing services, interpreter will be required to show valid identification.

Again, interpreters may use the LEP/SI Client Determination form to confirm interpretation sessions and verify invoices submitted for payment.

Scheduling On-site Interpreter Services

Whenever possible, an on-site and/or telephone interpretation session should be scheduled at least 48 hours in advance using a qualified and/or certified interpreter. OPGS will assist with scheduling by distributing the names and contact information of interpreters to divisions and offices on a regular basis. Some county office and divisions may have prearranged contracts with independent interpreter services. Whether using a DHR or county contracted interpreter, DHR staff must complete the LEP/SI Client Determination Form.

Scheduled interpreters may require a two-hour minimum payment for their services. This time is usually billed in 15-minute increments. If two or more DHR staff utilize the same interpreter within the two-hour block, the interpreter does not double charge, but rather submits only one invoice for billing. DHR agencies and office should use the LEP/SI Client Determination Form to verify information about the interpretation session.

DHR staff is responsible for tracking the time an interpreter is utilized. For both on-site and telephone assistance, it is appropriate for an interpreter to begin charging for their service at the scheduled appointment time, even if the DHR staff person is delayed in providing services to the client.

At the end of the interpretative session, DHR staff must complete the LEP/SI Client Determination Form. The DHR employee and interpreter must sign the form when on-site services are provided. Payment for interpreters must be submitted within 24 hours of receiving services.

Telephone Interpreter Services

Customers have the option of obtaining many DHR services without an appointment. To ensure meaningful access to services for walk-ins and in emergency situations, DHR agencies may contract with a language line or utilize a DHR interpreter who has agreed to respond in an emergency situation. Information about Language Line access must be posted in a convenient location for quick access by DHR staff.

Language line services are usually very costly and average between \$2.00 and \$5.00 per minute, plus an annual or monthly access fee. Hence, discretion must be used when utilizing a language line service. When at all possible, utilize a language line to obtain basic information to initiate an application process and then schedule an on-site appointment with a less expensive interpreter or interpreter service.

In lieu of contacting a language line, several interpreters listed on DHR's website have agreed to wear a pager or carry a cell phone to ensure a 15 minute response time. When calling these designated interpreters, DHR staff should not wait for a return, but rather continue placing calls to each designated interpreter on the list until an interpreter is secured. Unless call waiting is available, when leaving a message, ask the interpreter to return their call on another line if you continue to contact another interpreter on the list.

There are three methods for communicating with client through a language line service. Utilizing a three-way telephone line is by far the preferred method of communicating with a language line service. If a three-way telephone line is not available, the DHR staff person must use a speakerphone or merely pass the telephone back and forth between the client and DHR staff person. In any case, the privacy of the client must be considered. DHR agencies and offices may consider designating a secured, private area to ensure DHR's commitment to the privacy of the client and Federal laws such as HIPAA.

Interpreters providing services via telephone for "walk-ins" will begin charging at the onset of conversation with the DHR staff person. If the telephone session is scheduled, the interpreter may operate according to the same procedure used for on-site services. In either case, when utilizing an interpreter via telephone, the agency may require the use of a telephone log sheet to verify access time for monthly billing statements (Attachment G).

Note: The LEP/SI Client Determination Form must be completed every time an interpreter or interpretative service is utilized, even if the service is provided by a bilingual employee and documented on a telephone log sheet.

Strategies for Using Interpreters to Improve Service Delivery

According to the medical interpreting community, "the appropriate role for the interpreter is the least invasive role that will assure effective communication and care" (Diversity RX). Interpreters are expected to act as conduits of information to strengthen the relationship between the client and the caseworker. In all cases, the interpreter must work to strengthen the relationship between the client and caseworker. Strengthening this relationship may involve the interpreter functioning as a clarifier as they explain words that have no linguistic equivalent, a cultural broker as the interpreter provides the necessary framework for understanding the message being conveyed, and an advocate when the

interpreter takes action on behalf of the client outside the interpreting session (Diversity RX).

It is the responsibility of DHR staff to ensure that the interpreter is applying the appropriate role as they communicate the message. DHR staff should monitor the interpretative session and intervene if errors associated with the following rules are being committed:

- Interpreters are not permitted to give legal or medical advice.
- Interpreters are not permitted to edit out material he/or she may believe is irrelevant.
- Interpreters are not permitted to engage in private conversations with the client.
- Interpreters should never ask independent questions of the client.
- Interpreters should interpret every statement made by both parties during the interpretive session.
- Interpreters are not permitted to edit the conversation.

If DHR staff observes violation of any of these rules, they are to intervene immediately.

DHR staff utilizing interpreters must be considerate of the interpreter's responsibility to convey the message within the cultural context of both the DHR staff person and client. This often requires a great deal of control on the part of the interpreter to remain neutral and serve primarily as a conduit for understanding. Hence, DHR staff should offer the interpreter a break every 45 minutes.

There are several techniques you may employ when using an interpreter. While behaviors may vary by cultural group, demonstrating respect is recognized and valued by all people. When using an interpreter, consider the following strategy:

- Always display professionalism and let the client know you are interested in their situation by being polite and formal.
- When communicating with the client through an interpreter, look directly at the client when you speak, not at the interpreter.
- Avoid raising your voice in an attempt to clarify your statements.
- Do not use hand gestures to emphasize statements; they may prove to be culturally insulting or even frightening.
- Use simple, non-technical language or acronyms unless required for medical or legal purposes.
- Do not use slang.
- Provide instruction in the proper sequence and discuss one topic at a time.
- Avoid using double negatives.
- Avoid using leading questions that may encourage the client to say what he or she thinks you want to hear.
- Whenever appropriate, ask open-ended questions rather than questions requiring a "yes" or "no" response.
- Remember, LEP person will take your words literally.

Note: Strategy provided in part by TAPESTRI, Inc.

DHR staff is encouraged to participate in DHR's professional training dealing with how to use and interpreter. This training will be available early in 2004. Contact the LEP/SI Coordinator for additional information by calling 404/657-5244.

Interpreter Recruitment

The recruitment of interpreters by DHR is accomplished by advertising interpreter contract positions on the state website at **www.dhrjobs.com**. Information about each applicant is verified by OPGS, who then refers applicants to available screening and training programs for interpreters. To request information about DHR's recruitment and screening process, contact OPGS at 404/657-5244.

DHR staff at all levels must refer interpreters that they are currently using to **www.dhrjobs.com** to complete the interpreter application and participate in DHR's verification process. In order to meet the Federal standard of only using qualified and/or certified interpreters, DHR must verify the skill level of the interpreter and refer the interpreter to an available training and screening program. DHR will orient all interpreters about its services and test interpreters on their knowledge of pre-selected, social service terminology. All interpreters utilized by DHR must undergo a criminal history investigation and carry a photo identification card.

If the interpreters are obtained through an independent contractor, agency or corporation, the interpreters may not be authorized by their employer to complete the DHR interpreter application. If not, it is the responsibility of the county agency to verify the credentials of the interpreters used through contract language services. Contract interpreter services must meet the same standards and requirements established by DHR for interpreters and translators.

Translation of Client Notices, Materials and Other Information

All requests for translation services will be coordinated through The Office of Policy and Government Services. The Limited English Proficient/Sensory Impaired Client Services Coordinator will identify appropriate qualified and/or certified translators for translation services. All translators' credentials will be maintained by the DHR OPGS and made available to the requesting office or division upon request. All requests for translation services must be submitted using the Translation Request Form (TRF) (Attachment H) using the following process. The TRF is also available at www.dhr.georgia.gov "Multicultural Resources."

1. Write the name of the document or form under "Job Title/Form Name."
2. Enter the organizational and contact information into the first box.
3. Note if a form number is required. If so, complete the Forms Ordering/Reordering at <http://167.193.144.229/ocs/Workspace/index.html>. All foreign language form numbers should include a suffix designating the language translation – i.e. SP for Spanish, VT – for Vietnamese, SO for Somali, CH Chinese, RU for Russian, etc.). Contact the LEP/SI Coordinator for language acronyms – 04/657-5244.
4. Enter the organization code, project number and sub-class number.
5. Obtain a purchase order number from the Purchasing Department. (Each requesting division or office is responsible for covering the cost associated with translating documents).
6. Document into which language the materials are to be translated.
7. Check the type of service requested (translation, proofreading, formatting, or desktop publishing).
8. Contact the designated Account Manager to obtain a copy of the English version of the document on CD or diskette. If the document contains graphics, submit a "live" rather than PDF copy or translation. (The Office of Communications – OCS – maintains a list of Account Managers).

- 9 Forward the completed form, copy of the purchase order, and CD or diskette containing the material to be translated to the LAT member or designee representing your division or office for approval.
10. The LAT representative will forward the TRF, purchase order, and CD or diskette to the Account Manager for the Office of Communications (OCS) who will then forward the request to the LEP/SI Coordinator.
11. The LEP/SI Coordinator will complete the Vendor Information section and send the materials to an approved translation vendor.
12. Upon receipt of the translated document, the LEP/SI Coordinator will provide the LAT representative with a camera-ready copy, CD and/or diskette in PDF file, and Receiving Report.
13. The LAT member will forward the finished product to the contact noted on the TRF for printing.
14. The LEP/SI Coordinator or designee will maintain a record of the request for translation and translated materials.

NOTE: DHR's legal advisors may be required to scrutinize forms before submission for translation. Check with the division or office director to determine if DHR's legal advisors must review the form.

Providing Translated Follow-up Instructions

All follow-up instructions provided to the client for treatment or extended services must be offered in either written, translated form or orally by using an interpreter. If the client instructions have not been standardized and translated, DHR staff must notify the client at the initial interview through an interpreter that a DHR staff

person through an interpreter to provide necessary instructions may contact them.

Providing Language and Other Interpretive Services for Sensory Impaired Clients

Providing language and other interpretive services for sensory impaired clients requires the use of interpreters and transliterators, assistive technology and other communication resources. The LEP/SI Client Determination Form must be completed for all interpreters and support services provided to sensory impaired clients.

Procedure for Assisting the Deaf or Hearing and Speech Impaired

Several methods may be employed when communicating with the deaf and hearing impaired. Resources for serving this population are listed on the DHR website at www.dhr.georgia.gov "Multicultural Resources." The most common method of communication with the Deaf and Hearing Impaired is through a TTY/TDD assistive device (TTY – Mechanical Teletypewriter for the Deaf; TDD – Telecommunications Device for the Deaf).

A TTY/TDD allows deaf and hearing impaired clients to communicate on the phone. Messages are typed and sent through the phone using a special keyboard/communication device. Hearing and speech impaired people are able to communicate over the telephone lines by connecting a telephone with a typewriter-like terminal called a telecommunications device for the deaf (TTY/TDD). This device has a keyboard, display screen, and a specialized modem that sends and receives TTY/TDD tones. A user types a message on the terminal. Generating tones that are sent over the telephone lines to the receiving terminal. These tones are then converted by the receiving terminal into a written message, which is displayed on the call recipient's screen.

The Georgia Telecommunications Relay Service is widely used by DHR staff and may be accessed by calling 711 or 1-800-255-0135. Text telephone users may

also dial these numbers to access service. There is no access charge for using 711. The customer service number for AT&T relay is 1-800-682-8706.

Utilizing the Georgia Relay Service is fairly simple. A person who is deaf, hard of hearing, or may have a speech loss and uses a TTY/TDD types his/her conversation using a text telephone (TDD/TTY). A specially trained Communications Assistant (CA) relays the message by reading the text message to the hearing person at the other end. The CA then relays the hearing person's spoken words by typing them back to the TDD/TYY user.

Relay service is also available over the Internet. Deaf, hearing impaired and disabled customers can simply go to www.relay.att.com to be connected to a CA. Customers may also go to www.relay.att.com/vrs to access video relay service, where certified a certified American Sign Language interpreter will relay your signed conversation to the hearing party.

The Georgia Telecommunications Relay Service also provides assistance for people with speech disabilities. Speech-to-Speech service lets people with speech disabilities communicate on the telephone by using their own voice, or voice-assisted device, through the help of a specially trained CA by dialing either 711 or 1-800-229-5746.

Spanish Relay Service is available to Spanish speaking residents of Georgia. TTY and voice users can dial the Spanish Relay Service for local calls in Georgia and state-to-state calls anywhere in the United States, including Puerto Rico and the U.S. Virgin Islands. A Spanish hearing caller may dial 1-800-855-2885 to reach Spanish deaf, hearing impaired, or speech disabled and Spanish text telephone users may dial 1-800-855-2884.

Spanish is the only foreign-language offered through TTY/TDD. If a non-English and non-Spanish speaking client who is hearing impaired requests service from DHR, an International Sign Language Interpreter must be provided. (Most "sign" language interpreters practice American Sign Language, and they would have

difficulty “signing” with people who do not speak English). DHR may schedule on-site services for hearing impaired, LEP clients and rely on translated, written correspondence between the two.

DHR works with GREAT DAY Inc./GREAT DAY Foundation to secure various support services for the Deaf including interpreter services, alcohol and drug abuse counseling, out-patient treatment, information and referral, family programs, prevention and education, aftercare, assessment and intake, groups, employment skills, and life skills. To access GREAT DAY services; call (404) 378-8553 (Voice/TTY) or 1-888-860-5403 (Fax).

The following procedure is suggested by the University of Arkansas’s Center for Students with Disabilities when utilizing TDD/TYY equipment.

1. When you answer the phone, you will know it is a TTY/TDD call when you hear the following:

- a rapid clinking sound after you answer the phone or
- no sound or voice at all (it may still be a TTY/TDD call).

If you do not get a quick response, do not hang-up.

2. When initiating a TTY/TDD call:

- Turn on the TTY/TDD.
- Place your phone receiver on the TTY/TDD according to equipment instructions.
- Type your normal office greeting message.
- After completing your message, type “GA” for “Go Ahead.”
- The caller will read what you have typed and will respond. When you see “GA” you will know it’s your turn to respond.

- When one person believes the conversation is over, he or she will say, “Bye, SK” for “Stop Keying.”
 - Typing “SK” or “GA” leaves the conversation open for the other person to respond before ending the conversation.
 - Type “SKSK” means that you are certain the conversation is complete and you may hang up.
3. To call someone on the TTY/TDD:
- Turn on the TTY/TDD.
 - Dial the phone number on your standard telephone, listen for the phone to ring or give a busy signal.
 - When you hear the TTY/TDD –sound, place the receiver on the TTY/TDD as stated above.
 - After the greeting phrase and “GA” scroll across the display, identify yourself and proceed with the conversation.

Procedures for Using Sign Language Interpreters

Sign language is not a universal language. Like spoken languages, sign languages around the world are entirely different. The common language used in the United States is American Sign Language. International Sign Language (formerly called Gestuno) is composed of vocabulary signs from different sign languages that Deaf people agreed to use at international events and meetings. International Sign language must be used for Deaf persons who are also LEP.

DHR staff may identify sign language interpreters by accessing www.dhr.georgia.gov “Multicultural Resources.” As with foreign-language interpreters, DHR must complete the LEP/SI Client Determination Form when utilizing a sign-language interpreter.

The Minnesota Department of Human Resources recommends the following procedures when utilizing a sign language interpreter:

- Meet with the interpreter beforehand to clarify unique vocabulary, technical terms, acronyms, jargon, seating arrangements, lighting and other needs.
- Provide interpreter with any written materials ahead of time.
- Reserve seats for the deaf or hard of hearing participants that provide a clear view of the speaker and interpreter. (Deaf or hard of hearing participants may still choose to sit elsewhere.
- Position the interpreter within in the consumer's sight line to allow deaf or hearing impaired participants to pick up visual cues and the expressions of the speaker.
- In small group discussions, consider using a circle or semi-circle seating arrangement instead of a theater style arrangement.
- Provide good lighting so the interpreter can be seen. (If lights will be turned off or dimmed, be sure the interpreter can still be seen clearly, and use spotlight or small lamp to direct toward the interpreter).
- Talk directly to the deaf or hearing impaired person.
- Maintain eye contact with the deaf or hearing impaired person.
- Avoid directing comments to the interpreter (i.e. "Tell him.." or "Ask her...") by responding directly to the deaf or hard of hearing person.
- Speak naturally.

- Speak at your normal pace. Interpreters will ask you to slow down or repeat if necessary.
- Interpreters listen for concepts and ideas, not just words, to render an accurate interpretation.
- Avoid private conversations – everything will be interpreted.
- Whatever the interpreter hears will be interpreted. Do not ask the interpreter to censor any portion of the conversation.
- Ask the deaf or hard of hearing person directly if they are following the conversation.
- One person should speak at a time. (If you are facilitating a group discussion, be aware that the interpreter will be several seconds behind. Pause before recognizing the next speaker to allow the interpreter to finish with the current speaker).
- Avoid asking the interpreter for opinions or comments regarding the content of the meeting. (Interpreters follow a code of ethics, which requires impartiality and confidentiality with all assignment related information).
- Do not assume the interpreter has prior knowledge of the deaf person or will be interpreting future appointments.
- Provide a short break every hour. (Interpreting is mentally and physically taxing. Do not expect the interpreter to interpret during the break).

Procedure for Communicating with the Visually Impaired

The most commonly methods used by DHR for communicating with the visually impaired are through voice, Braille, large print and cassette audiotapes. DHR does not maintain assisted technology such as computer assisted speech systems that convey text to speech and Braille terminals readers at its local offices. Clients requiring assisted technology are referred to a local service agency in the area.

The DHR website lists agencies that offer assisted technology for the sensory impaired (www.dhr.georgia.com "Multicultural Resources." Either telephone or on-site language interpreters should be used when communicating with a LEP, visually impaired clients. Other courtesies DHR staff may offer visually impaired clients include enlarging documents on a copier, assisting clients complete forms, and escorting clients to and from DHR facilities.

General Procedures for Verifying Immigrant Status

The following lists general steps to be taken when determining alien eligibility to Federal Public Benefits. Detailed information about immigrant eligibility is offered in Section III, pages 35 through 56.

1. Determine if your program or service is a Federal Public Benefit and subject to PRWORA immigration restrictions (Annex B and C). If the benefit you provide is not a Federal Public Benefit, eligibility should not be restricted on the basis of immigration status. Such programs should not verify the immigration status of the applicants and should not utilize unnecessary procedures that deter applicants on the basis of immigration status.
2. If your program or service is a Federal Public Benefit; you should verify the immigration status of the applicant for the benefit. The applicant to be

verified is the individual who will receive the public benefit should the application be approved. A person (a) applying for a Federal Public Benefit on behalf of another, (b) representing an individual seeking a public benefit, or (c) seeking to facilitate an individual's application is not an applicant unless that person is seeking a public benefit for himself or herself.

For purpose of Peachcare for Kids, the applicant is the child, not the parent. For purpose of TANF or Food Stamp programs, the application unit can be the entire household or family. However, any member of the family or household can choose to be a non-applicant, in which case, the household/family benefit is reduced by the non-applicant's prorated share.

3. If the immigrant is an "applicant," determine the following:
 - if their immigration status is "qualified" or "non-qualified" (page 39 – 42),
 - the immigrant's date of arrival (page 41),
 - if sponsor deeming is required by the program (page 46),
 - if the immigrant falls under the "Mandatory Coverage" guidelines (page 40).
4. Determine the satisfactory immigration status of an applicant by self-proclamation or using the SAVE system (Section III, page 53). The SAVE system must be used to verify immigration status for TANF, non-emergency Medicaid, Food Stamps and Peachcare for Kids.

Note: DHR must not require applicants to provide information about the citizenship or immigration status of any non-applicant family or household member or deny benefits to an applicant because a non-applicant family

or household member has not disclosed his or her citizenship or immigration status.

5. Notify the applicant if the services they are requesting could be used in a public charge determination by BCIS (Section III, page 53).
6. If the eligible sponsored immigrant is applying for Food Stamps, TANF, Peachcare for Kids, and non-Emergency Medicaid, determine if a deeming determination must be made for the applicant (Section III, page 46).

If a deeming determination must be made, determine if the applicant fits within the indigence exception. If the applicant fits within the indigence exception, make a waiver determination for one year and notify the Attorney General (Section III, page 48).

7. Request SSNs of applicants only when authorized to do so by law (Section III, page 50 & 52). DHR may request that individuals voluntarily provide SSNs when not authorized to require them. However, under the Privacy Act, anytime a DHR requests an individual to disclose his or her SSN, DHR “shall inform that individual whether that disclosure is mandatory or voluntary, by what statutory or other authority such number is solicited, and what uses will be made of it.”
8. Do not verify immigration status or request SSNs for emergency Medicaid applicants.
9. If an applicant has a disability that limits the applicant’s ability to provide the required evidence of citizenship or nationality (e.g., mental retardation, amnesia, or other cognitive, mental or physical impairment), make every effort to assist the individual to obtain the required evidence.
10. Because of privacy and civil rights concerns, DHR staff should not report anyone whom they believe to be undocumented to the BCIS. Any

reporting of undocumented immigrants should only be done after a formal determination by DHR (Section III, page 54).

Note: If DHR must verify immigrant status, do so in a non-discriminatory manner. Do not treat people differently because of their lack of English proficiency, accent or skin color. Do not impose unnecessary income or identification verification requirements that deter applicants on the basis of national origin such as a requirement for a Georgia state identification card, without alternatives that people can obtain. If immigration status is irrelevant to program eligibility, do not ask questions about status.

Section IV - Complaint Resolution and Monitoring Process

Complaint Resolution Process

Managing complaints for discrimination against LEP and SI clients, including national origin complaints and complaints affecting immigrants, should be accomplished in accordance with existing departmental policies and procedures. In addition to these procedures, all complaints dealing with services to LEP and SI clients must be forwarded to the LEP/SI Coordinator with the OPGS. The LEP/SI Coordinator will share the complaint with the LEP/SI Problem Resolution Team (PRT) within 24 hours after receipt of the service issue. The PRT will work with the state and initiating agency to resolve the issue.

Monitoring Process

The OPGS will monitor services to LEP and SI clients and immigrant access issues in conjunction with monitoring activities conducted by each division or office. Three methods may be used to monitor: (1) By accompanying DHR's divisions and offices as they conduct regular, on-site monitoring activities; (2) By implementing an annual survey process to determine DHR's record in providing services to LEP/SI clients; and, (3) By responding to and monitoring customer complaints. The OPGS will utilize the following criteria for determining if DHR agencies and offices are providing meaningful access to services:

- compliance with all items listed on the LEP/SI Service Checklist,
- the total number of LEP/SI clients receiving service;
- the total number of instances, by language category, service was provided;
- total number of hours, by language category, services were made available;

- the number of LEP/SI Client Determination Forms completed and entered into the LEP/SI Services databank;
- the number of qualified or certified interpreters vs. the number of unqualified used during the evaluation period;
- the type of support and follow-up services rendered;
- timeliness of service;
- total number of staff trained on LEP/SI Policies and Procedures; and
- corrective action taken.

Annex A

DHR Plan for Client Services for Persons With Limited English Proficiency

***Plan for Client Services
For Persons with Limited
English Proficiency and
Sensory Impairment***

***Georgia Department
Of Human Resources***

JULY 2002

DEFINITION

FOR PURPOSES OF THIS DOCUMENT, THE WORD "LANGUAGE" REFERS TO THE METHOD BY WHICH AN INDIVIDUAL COMMUNICATES WITH ANOTHER AND INCLUDES LANGUAGES OTHER THAN ENGLISH AND GENERALLY ACCEPTED MEANS OF COMMUNICATION USED BY INDIVIDUALS WITH SENSORY IMPAIRMENTS.

I. Purpose and General Policy

DHR IS COMMITTED TO ENSURING THAT LIMITED ENGLISH PROFICIENCY (LEP) AND SENSORY IMPAIRED CLIENTS HAVE MEANINGFUL LANGUAGE ACCESS TO ALL PROGRAMS AND ACTIVITIES CONDUCTED OR SUPPORTED BY THE DEPARTMENT. THOSE SERVICES INCLUDE PROGRAMS AND ASSISTANCE PROVIDED DIRECTLY BY THE DEPARTMENT, ITS DIVISIONS AND OFFICES (LISTED BELOW), AS WELL AS THOSE FUNDED BY GRANT IN AID RESOURCES TO COUNTY, REGIONAL AND LOCAL OFFICES. IN ADDITION, MEANINGFUL LANGUAGE ACCESS WILL BE ENSURED BY ALL ENTITIES CONTRACTING WITH THE DEPARTMENT FOR THE PROVISION OF PUBLIC SERVICES.

- Department Programs and Offices
 - Office of Adoption
 - Division of Aging Services
 - Office of Child Support Enforcement
 - Office of Regulatory Services
 - Division of Family and Children Services
 - Division of Mental Health, Mental Retardation and Substance Abuse
 - Division of Public Health

For a comprehensive listing of services by division and office, the Department of Human Resources maintains a website at www.dhr.state.ga.us with a link to the site in Spanish.

II. RESPONSIBILITIES

The Department shall have in place specific written policies and procedures, both at state and local levels concerning language access. These policies and procedures shall designate the Division, Office, or specific staff position responsible for implementing activities related to these policies and procedures.

The responsibilities for carrying out the policy and procedures in this document are shared between the Department as a whole through the Office of Policy and Government Services and the various County Offices, Regional Offices, and State Office Programs that provide direct benefits or services to potential or actual clients through a Local Client Language Services Coordinator.

A. RESPONSIBILITIES OF THE DEPARTMENT OF HUMAN RESOURCES DHR

DHR's Office of Policy and Government Services will be the primary point of contact for the county, regional, and state Program Client Language Services Coordinators (CLSCs). This office has the following specific responsibilities:

1. Maintaining DHR's Limited English Proficiency and Sensory Impairment (LEP/SI) policy and keeping it current and relevant;
2. Maintaining an active list of all local CLSCs within the agency as reported by county directors and regional office administrators;
3. Providing initial training, support and guidance to local CLSCs and ensuring that CLSCs receive ongoing training bi-annually;
4. Developing and maintaining a statewide resource database from the lists generated by the local CLSCs;
5. Maintaining the annual self-assessment information provided by the county, regional and state program offices;
6. Overseeing, along with programs, the translation and printing of critical forms into languages most often and significantly encountered in the state;
7. Working, along with the program divisions and offices and with the Office of Information Technology, to ensure that the agency's electronic systems include alerts and information on the client's language needs,
8. Managing contracts for telephone interpreting services, sign language interpreter services, interpreter/translator testing contracts, and other statewide contracts that provide language services to LEP/SI clients;

9. Receiving, reviewing and investigating appropriate complaints of discrimination based on disability or national origin as they relate to language assistance; and,
10. Serving as the point of contact for state-level and federal-level compliance reviews.

B. RESPONSIBILITIES OF THE LOCAL CLIENT LANGUAGE SERVICES COORDINATOR

The director of each Health District, DFCS region, MHMRSA region, Aging region and Child Support region will designate a local CLSC. Each local CLSC has the following responsibilities and duties:

1. Keeping current and relevant local agency or office LEP/SI policy and procedures for determining language needs of the local service area; securing language resources; overseeing oral and written language services, including notifying clients of free language services, assessing staff training needs, providing staff training, and monitoring quality and effectiveness of language access services,
2. Preparing an assessment report, at least annually, on the language demographics of the local community and the Agency's capacity to meet those needs,
3. Overseeing the provision of oral and written language services to clients, and,
4. Ensuring that clients receive notification of language services at no cost to them.

IV. SPECIFIC POLICY AND PROCEDURES

A. NEEDS AND RESOURCE ASSESSMENT

DHR has examined general population data within the state to determine the extent to which interpreter services are needed for LEP and sensory impaired clients. The largest language group needing interpreter services were Hispanics, who represent approximately 70 percent of the LEP population. Estimates of the total LEP population in Georgia based on currently available census data range between 266,000 and 308,000.

The resources that are currently being used include interpreters from advocacy groups, departmental employees and paid interpreters.

The department's Office of Policy and Government Services will conduct ongoing assessments of needs and resources based on Census 2000 data, agency records and contacts with community organizations.

DHR will record, based on the assessments, the population of the persons eligible to be served or likely to be directly affected by programs and services of DHR. DHR will make projections, where feasible, of the number of clients who are LEP/sensory impaired. DHR will endeavor to record in records and electronic files the language needs of LEP/sensory impaired clients and record the communications assistance actually provided. This will include the language of the LEP client and method of communication used for the sensory impaired client (i.e., American Sign Language, Braille, etc.).

Language assistance would likely be needed at the following contact points:

- Program Intake
- Eligibility Assessments
- Caseworker Contacts
- Home Visits
- Field Contacts
- Telephone Contacts

DHR will identify the resources that are needed based on assessments and specify the location and availability of these resources.

DHR will determine the arrangements that must be made to access the resources identified in a timely manner.

B. LANGUAGE ASSISTANCE

1. Oral Language Interpretation

DHR will provide competent interpreters and other oral language assistance in a timely manner.

Interpreter Sources

DHR will use a range of resources that include:

- Bilingual staff that are trained and competent in the skill of interpreting,
- Staff interpreters who are trained and competent in the skill of interpreting,
- Outside interpreter services,
- Voluntary community interpreters who are trained and competent in the skill of interpreting, and,
- A telephone language interpreter service.

Considerations for the type of resources to be used will include the frequency with which staff members are required to communicate program information to clients who speak a primary language other than English or who have a sensory impairment, and the difficulty in securing interpreter services in a timely or cost effective manner.

Directory of Interpreters

The Department of Human Resources will maintain a directory of interpreters for LEP and sensory impaired persons that will list interpreters according to the geographic areas served by the interpreters. The directory will be updated annually by the department and will be made available to local offices.

Certified/Qualified Interpreters

DHR does not certify individuals as interpreters. However, any person may serve as an interpreter for LEP people and be placed on the Department's list of qualified interpreters provided:

- The person has been certified pursuant to 28 USC & 1827 (B)(1) or found to be otherwise qualified pursuant to 28 USC & 1827 (B)(2) in the LEP individuals language by the Director of Administrative Office of the United States Courts; or

- Is registered in the LEP's language on the register of interpreters maintained by the Commission on Equality of the Supreme Court of Georgia; or Is currently certified by any state, regional or national interpreting association, board or body as proficient in the LEP individual's language.

Other Qualified Interpreters

Any person who demonstrates verbal proficiency in English and the language for which they will interpret by achieving an accuracy score of 75% on a standard examination administered by the Department and who completes the Department's training program for qualified interpreters will be deemed a qualified interpreter for persons who are LEP/SI and be entered on the Department's list of qualified interpreters for the specific languages or sensory impairments. The Department's training will include an orientation on program benefits and services, the terminology used in those programs, confidentiality/privacy standards, and instruction on DHR's Code of Professional Conduct.

Departmental Employees

Any employee of the department who demonstrates verbal proficiency in English and the language for which they will interpret by achieving 75% or more on a standard examination administered by the department will be deemed a qualified interpreter for persons who are LEP/SI in that language and be entered on the department's list of qualified interpreters for the specific languages or sensory impairments. The department has sought to supplement salaries of employees who become qualified as interpreters, but such employees will not be eligible for compensation for interpretation services beyond the employee's regular salary and any other authorized supplement thereto.

Non-Certified/Qualified Interpreters

DHR recognizes that a client may choose the services of an interpreter, such as a family member or friend, who is not certified. When this occurs, DHR will ensure informed choice by taking the following steps:

- DHR will inform the client that the department will provide an interpreter at no cost to the client.
- If the client makes an informed choice to use an interpreter who is not qualified, DHR will have the client sign a form documenting that choice.
- The interpreter will sign an acknowledgment of his or her responsibility and provide an oral translation of the informed choice statement to the client.
- These actions will be documented in the client's file with copies of the signed documents.
- DHR's service provider will determine, through the use of a qualified interpreter who would sit in to ensure accurate interpretation, whether the client's chosen interpreter is able to effectively communicate with both the provider and the client. Documentation will be placed in the file to indicate the basis upon which the determination is made that the client's chosen interpreter is proficient in English and the second language; has sufficient knowledge of the program and is familiar enough and understands commonly used terms and concepts necessary to conduct an effective interview with the client.
- The provider will determine if the use of the chosen interpreter would compromise the effectiveness of services and/or violate the client's confidentiality. If the determination is positive and the informed choice form is signed, the provider may proceed. Documentation will be placed in the file to indicate the basis upon which it was decided that the client's confidentiality would not be breached and that the information solicited during the interview is not compromised by the client or the family member or friend due to confidentiality issues. If negative, the provider will request the assistance of a qualified/certified interpreter and document the action in the client's file.

Translation of Written Materials

DHR will ensure that written materials provided in English to program participants will also be provided in other regular occurring languages. These materials will be available in hard copy and on the DHR Website.

DHR will determine on a statewide basis the language and sensory impairment groups that constitute a significant percentage of the order to determine the languages in which documents will be translated.

DHR will identify those documents deemed vital to the provision of information on services and for the provision of services. A list of forms and documents will be maintained and reviewed annually for inclusion. These documents may include applications, consent forms, letters containing important information regarding program participation, notices pertaining to adverse action, notices of the right to appeal, notifications to LEP persons informing them of free language assistance, and outreach materials normally sent to English-speaking customers or potential customers.

DHR will identify appropriate certified translation services available for translation services.

Provision of Notice

DHR will provide effective notice to LEP/SI persons that they have a right to language assistance and that such assistance is free of charge.

DHR will post and maintain signs in regularly encountered languages other than English in waiting rooms, reception areas and at other points of intake. DHR will use language identification cards that allow beneficiaries to identify their language needs.

DHR will stipulate in contracts or other vendor agreements that interpreter services are to be provided at no charge.

C. POLICIES AND PROCEDURES FOR SERVICE DELIVERY

When Services are delivered to clients, whether by departmental employees or contract vendors, DHR will ensure:

- LEP/sensory impaired customers will be identified as early as possible through the use of "I speak" cards,
- LEP/sensory impaired customers will be informed of their right to request an interpreter at no cost, and,
- No significant delays will occur in this process.

DHR will ensure that interpreters are used:

- When requested by a customer,
- When requested by a service provider of an LEP/sensory impaired customer,
- When necessary to establish or maintain a client's eligibility for DHR programs or services,
- When interpreter services are necessary to access public meetings sponsored by DHR or those under contract to DHR, and,
- When necessary for the customer to access any service funded directly or indirectly by DHR.

V. TRAINING

DHR will disseminate the LEP/sensory impaired policies and procedures to all employees likely to have contact with LEP/sensory impaired clients.

DHR will contract for training on cultural diversity with community organizations that are competent and experienced in such training and who are known to OCR.

DHR will contract for training on LEP/sensory impaired policy and procedures with community organizations that are competent and experienced in such training and who are known to OCR.

DHR will introduce new employees to LEP/sensory impaired policies and procedures in departmental orientation.

DHR will train current employees likely to contact LEP/sensory impaired individuals on an annual basis.

Training will ensure that employees are knowledgeable regarding:

- Policies and procedures of language access;
- Resources available to determine the language needs of a client;
- Resources available to ensure that access is provided in a timely and effective manner;
- Working effectively with language interpreters; and,
- Available documents that have been translated into languages other than English, and Policies and procedures for "informed choice."

DHR will notify interpreters that they are to follow the Code of Professional Conduct and that violations of the Code may result in removal from the DHR list of qualified/certified interpreters.

VI. MONITORING

DHR will monitor the Plan for Interpreter Services on an annual basis to evaluate its effectiveness to ensure language access to LEP/sensory impaired individuals.

Reassessment will include the following:

- Language needs,
- Policy and procedures,
- Training programs,
- Screening process for identifying certified/qualified interpreters,
- Translation practices,
- Effectiveness of the Problem Resolution Team, and
- Effectiveness of the monitoring process.

DHR will require each program region to submit a Language Assistance Plan to DHR for approval. The Plan must address each county within the program region as a separate entity with reference to the points to be included in the Plan as listed below.

These plans will include:

- Identity of interpreters,
- Contracts made to provide language access services,
- Determination of language needs in the service area, and,
- Program monitoring information.

DHR will develop a reporting form (by county) that includes:

- Total number of LEP/sensory impaired clients receiving assistance;
- Number of translators by language category;
- Total number of instances, by language category, this service was provided; and
- Total number of hours, by language category, this service was made available.

DHR will prepare an informational document describing a Problem Resolution Team. This team will assist the department in identifying and offering programmatic problems facing LEP/Sensory Impaired Clients. The document will include the following:

- Description of Team functions;
- Contact points such as telephone numbers, addresses and individuals to contact;
- Forms for addressing complaints;
- Time frames for response; and,
- A description of the appeals process

Annex B

Federal Public Benefit Programs With Immigration Status Restrictions

Federal Public Benefit Programs With

Immigrant Status Restrictions

(Current as of November 2003)

- Adoption Assistance
- Administration on Developmental Disabilities (ADD) – State Developmental Disabilities Councils (direct services only).
- ADD _ Special Projects (direct services only)
- ADD – University Affiliated Programs (clinical disabilities assessment services only)
- Adult Programs/Payments to Territories
- Agency for Health Care Policy and Research Dissertation Grants
- Child Care and Development Fund
- Clinical Training Grant for Faculty Development in Alcohol & Drug Abuse
- Foster Care
- Health Profession Education and Training Assistance
- Independent Living Program
- Job Opportunities for Low Income Individuals (JOLI)
- Low Income Home Energy Assistance Program (LIHEAP)
- Medicare
- Medicaid (except assistance for an emergency medical condition)
- Mental Health Clinical Training Grants
- Native Hawaiian Loan Program
- Refugee Cash Assistance
- Refugee Medical Assistance
- Refugee Preventive Health Services Program
- Refugee Social Services Formula Program
- Refugee Social Services Discretionary Program
- Refugee Targeted Assistance Formula Program
- Refugee Targeted Assistance Discretionary Program

- Refugee Unaccompanied Minor Program
- Refugee Voluntary Agency Matching Grant Program
- Repatriation Program
- Residential Energy Assistance Challenges Option (REACH)
- Social Services Block Grant (SSBG)
- State Child Health Insurance Program (CHIP)
- Temporary Assistance for Needy Families (TANF)
- Food Stamps
- Supplemental Security Income (SSI)

NOTE: DHR does not administer all of the programs listed. While all of these programs provide “Federal public benefits,” some benefits or services under these programs may not be provided to an “individual, household, or family eligibility unit” and therefore, do not constitute “Federal public benefits” as defined by PRWORA. HHS interprets the phrase “individual, household, or family eligibility unit” to refer to benefits that are (1) provided to an individual, household or family, and (2) the individual, household, or family must, as a condition of receipt, meet specific requirements (e.g., a specified income level or residency (HHS Federal Register: August 4, 1998, Volume 63, Number 14, Page 41657- 41661)).

Annex C

Federal Public Benefit Programs Without Immigrant Status Restrictions

Federal Benefit Programs Without Immigration Status Restrictions

- Emergency Medicaid and other emergency medical services.
- Immunizations, testing and treatment for symptoms of communicable diseases (outside of the medical program).
- Short-term non-cash disaster relief.
- Certain housing assistance if receiving on 8/22/96.
- WIC (state option), School Lunch, School Breakfast, Summer Food Service Program, and Child and Adult Care Food Program.
- Programs delivered at the community level that do not condition assistance on income or resources and are necessary to protect life or safety.
- Prenatal care: New rule from USDHHS that gives states the option of providing health insurance coverage to fetuses through SCHIP (Peachcare for Kids).
- Services or assistance specified by the Attorney General that (i) deliver in-kind services at the community level; (ii) do not condition the provision of assistance, the amount or assistance provided, or the cost of assistance provided on the individual recipient's income or resources; and (iii) are **necessary for the protection of life or safety** are exempted from verification requirements:

Child protection and adult protection services

Violence and abuse prevention, including domestic violence

Mental illness or substance abuse treatment

Short-term shelter or housing assistance (e.g. battered women's shelters)

Programs during adverse weather conditions

Soup kitchens, food banks, senior nutrition programs

Medical and public health services & mental health, disability or substance abuse services
necessary to protect life or safety

Programs to protect life & safety of workers, children & youth, or community residents

Other services necessary for the protection of life or safety

NOTE: DHR does not administer all of the programs listed. While all of these programs provide "Federal public benefits," some benefits or services under these programs may not be provided to

an “individual, household, or family eligibility unit” and therefore, do not constitute “Federal public benefits” as defined by PRWORA. HHS interprets the phrase “individual, household, or family eligibility unit” to refer to benefits that are (1) provided to an individual, household or family, and (2) the individual, household, or family must, as a condition of receipt, meet specific requirements (e.g., a specified income level or residency (HHS Federal Register: August 4, 1998, Volume 63, Number 14, Page 41657- 41661)).

Attachment A

LEP/SI Client Determination Form



Limited English Proficient / Sensory Impaired Client Services
Client Determination Form

Division/Office: _____ County: _____ Program: _____

☐ **Limited English Proficient (LEP)** ☐ **Visually Impaired** ☐ **Hearing Impaired**

Client Name (Enter All That Apply)

First	Middle	Maiden	Married	Family or Surname
Client Identification #:		County of Residence:		Date of Birth:
<input type="checkbox"/> Male <input type="checkbox"/> Female	Race:		Ethnicity and /or Nationality:	
Primary Language (Spoken):			Primary Language (Written):	

Services Delivered

<input type="checkbox"/> Contact a foreign language interpreter or interpreter service.	<input type="checkbox"/> Employee <input type="checkbox"/> Family Member
<input type="checkbox"/> Contact a sign language interpreter for the hearing impaired.	<input type="checkbox"/> Employee <input type="checkbox"/> Family Member
<input type="checkbox"/> Interpreter's/Interpreter Service Name, Address, and Contact Number:	
Interpreter's DHR Contract or Identification #	<input type="checkbox"/> Qualified? <input type="checkbox"/> Certified?
Appointment Date: _____	
Appointment Time: _____ Interpreter's Starting Time: _____ Interpreter's Ending Time: _____	
Rate _____ per Unit (Hour/Minute) x _____ (# of units - Rounded by Quarter Hour) = _____ Cost of Service	
Other Expenses: _____ Total Due: _____	
Interpreter Service Status: <input type="checkbox"/> Met Expectations <input type="checkbox"/> No Show / Cancellation Without 24 hour Notice	
Client Status: <input type="checkbox"/> Arrived as Scheduled <input type="checkbox"/> No Show	
<input type="checkbox"/> Provided Waiver of Rights to Free Interpreter Services Form	
<input type="checkbox"/> Provide translated forms, materials and notices.	
<input type="checkbox"/> Provide written information on "floppy" diskette and/or CD.	
<input type="checkbox"/> Provide transcribed forms, informational materials and client notices into Braille.	
<input type="checkbox"/> Provide audiotape instruction for the visually impaired.	
<input type="checkbox"/> Provide materials in large print.	
<input type="checkbox"/> Special Transportation Referral	<input type="checkbox"/> ESL Referral <input type="checkbox"/> INS/BCIS Change of Address Form
<input type="checkbox"/> Other Services:	
Comments/Follow-up:	

Signed: _____ Date _____
Employee Interpreter

INSTRUCTIONS FOR LEP/SI CLIENT DETERMINATION FORM

The LEP/SI Client Determination Form must be used at all points of contact with clients who have difficulty communicating in English (because their native language is not English) and for clients who are deaf, blind or otherwise sensory impaired. This form may be completed in handwritten form or on-line at www.dhr.georgia.gov "Multicultural Resources." Information from handwritten forms must be entered into the LEP/SI Client Determination Form database, which is located on Dorr's website. If you do not have Internet access, fax completed forms to the LEP/SI Coordinator 404/657-8732. A copy of this form must be filed in the client's case record.

Form Completion

1. After designating your division/office, county and program, check the box which best describes your client as "Limited English Proficient", "Visually Impaired" or "Hearing Impaired."
2. Enter the complete name of the applicant in the appropriate space. Using an interpreter, you may discern in which category a persons name may be classified.
3. Next, enter the your program's identifying case or client number followed by county of residence.
4. Select the appropriate gender and race from the drop down box if completing a web-based form. Otherwise, check the appropriate box and designate "Caucasian, Black, Asian, Other, or Multiracial" for race, and enter the ethnicity or representative cultural group in the appropriate text box.
5. Select the primary language spoken and written from those listed in the drop box. If the language is not listed, or if you are completing a handwritten form, write the client's language in the text box.
6. Check the type of service rendered (i.e. by an outside interpreter or service, an employee, or family member).
7. Document the interpreter's contact information.
8. Some interpreter's may have signed a contact with DHR to ensure professionalism of the language specialist. You may ask the interpreter for this number. An employer identification number or social security number may also be entered.
9. Ask the interpreter if they have successfully completed an interpreter-training course and if they are a qualified or certified interpreter. The majority of interpreters listed on Dorr's website have met this criteria.
10. Document the date and time of the appointment or time of service.
11. Confirm the time when the interpretive session begins and ends with the interpreter present.
12. Enter and calculate the rate of charge. Interpreter's listed on Dorr's website have agreed to charge a negotiated rate according to Dorr's interpreter pay scale (www.dhr.georgia.gov/ Multicultural Resources). Agencies and offices utilizing DHR interpreters may negotiate a rate of pay according to this predetermined scale. Rates must be negotiated and agreed on prior to the provision of service. DHR interpreters have agreed not to charge for travel or other expenses unless they involve an overnight stay or daily parking expense.
13. Document any other expenses charged by the interpreter such as mileage, parking, meals, and hotel.
14. Document the service status of both the interpreter and client. Report interpreter "no shows" to the LEP/SI Coordinator by calling 404/657-5244.
15. Note additional language access support by designating information provided and commenting on follow-up services. Additional comments may be attached to this LEP/SI Client Determination Form.
16. Both the DHR employee and interpreter must sign the LEP/SI Client Determination Form to verify services rendered and the cost of service. Signed forms are to be filed in the client's case file.

Attachment B

Client Waiver of Rights to Free Interpreter Services

Waiver of Rights to Free Interpreter Services

Free interpreter services are available through agencies of the Georgia Department of Human Resources (DHR). DHR will call an interpreter after identifying the primary language in which you are able to communicate. You are entitled to bring your own interpreter, however, DHR or its representative agencies will not authorize payment for interpreter services not previously secured or approved by DHR.

I, _____, have been informed of my right to receive free interpretive
(Client Name)

services from _____. I understand that I am entitled to
(Agency)

interpretive services at no cost to myself or to other family members, but do not wish to receive

DHR's free services at this time. I choose _____ to act as my
(Interpreter's Name)

interpreter from _____ until _____.
(Date) (Date)

I understand that I may withdraw this waiver at any time and request the services of an

Interpreter, which will be paid for by _____.
(DHR Agency)

To the best of my knowledge, the person I am using to act as my own interpreter is over the age of 18. I understand that this waiver pertains to interpreter services only and does not entitle my interpreter to act as my Authorized Representative. I also understand that the service agency may secure a qualified or certified interpreter to observe the interpreter of my choice during the interpreting session to ensure the accuracy of the communication and follow-up instructions.

The interpreter indicated below orally translated this form to me.

(Client's Signature) (Date)

(Interpreter's Signature) (Date)

(Interpreter Printed or Typed Name and Signature) (Date)

(Staff Person Signature) (Date)

Attachment C

Notification of Interpreter Services Wall Poster

Note: An enlarged wall poster may be obtained by calling the LEP/SI Coordinator at 404-657-5244.

Attachment D

U.S. Census “I Speak” Card

This “I Speak” card may be downloaded from the DHR website at www.dhr.state.ga.us under Multicultural Resources for LEP/SI Client Services/LEP/SI Client Forms and Notices.

Attachment E

Client Assurances Form



Assurances

The Georgia Department of Human Resources (DHR) assures that the following services are free and will be provided to applicants requesting these services:

Language Interpreter
Help in Filling Out Forms
Forms in Alternate Formats
Accommodations for a Disability

Furthermore, DHR and related agencies assure the following:

Application Assistance

- DHR will provide no-cost assistance in completing the application process for all individuals who cannot adequately communicate with DHR staff due to a disability, impairment, or difficulty speaking, writing or understanding English.
- DHR will provide information to all applicants about how their application will be processed and the effect on other family members.

Citizenship and Immigration Status

- DHR will request information (or certification or documentation) regarding citizenship and/or immigration status only when this information is relevant in determining the eligibility of applicants and/or recipients or is required under Federal law.
- DHR will not request immigration status information from persons applying for emergency Medicaid and/or other emergency health related services.
- Except for non-citizens applying for emergency Medicaid coverage, DHR will not provide benefits to applicants who do not disclose their immigration status for certain programs and services (i.e. Temporary Assistance for Needy Families, Food Stamps, Medicaid, and State Children's Health Insurance Program).
- DHR will allow family or household members who do not provide their immigration status to be treated as non-applicants, and will not delay or deny the application for members who disclose their immigration status solely because others choose not to disclose.

- DHR will not attempt to determine, via the Bureau of Citizenship and Immigration Services (formerly Immigration and Naturalization Service), the immigration status of non-applicant household members who do not provide their immigration status.

Social Security Number

- DHR will utilize SSNs to verify your family's income and to conduct matching with other agencies (such as Social Security Administration, the Internal Revenue Services, credit reporting agencies) and other matching sources.
- DHR will request information (certification of documentation) for Social Security Numbers (SSN), only when this information is relevant in determining the eligibility of applicants and/or recipients or when required under Federal law.
- DHR will not request Social Security Numbers from persons applying for emergency Medicaid and/or other emergency health related services.
- DHR will allow family or household members who do not provide their SSN to be treated as non-applicants, and will not delay or deny the application for members who disclose their SSNs solely because other members choose not to provide their SSNs.
- DHR will assist applicants to apply for SSNs.
- DHR will not delay, deny or discontinue assistance pending the issuance of their SSNs.
- NOTE: If you are applying for benefits other than Medicaid, TANF or Food Stamps, you should ask your caseworker whether you are required to provide your SSN or the SSN of any other person (i.e. Peach Care for Kids is a non-Medicaid program in Georgia, hence disclosure of the child's or any other person's SSN is voluntary and not required).



Policy of Nondiscrimination in Services Practices

If you believe you have been discriminated against because of your race, color, national origin, age, sex, medical condition (HIV/AIDS), physical or mental disability or religion, please contact the Department of Human Resources, Policy and Government Services by calling 404/657-5255 or sending a written complaint to the following address:

Coordinator
Limited English Proficient and Sensory Impaired Client Services
2 Peachtree Street SW
Suite 28-222
Atlanta, Georgia 30303 –3142
(Telephone) 404/657-5244
(Fax) 404/657-8732

You may also contact the U.S. Health and Human Services Office of Civil Rights by calling 404/562-7865 or forwarding a written complaint to:

Office of Civil Rights
U.S. Health and Human Services
Atlanta Federal Center
61 Forsyth St., SW
Suite 3B70
Atlanta, Georgia 30303
(Telephone) 404/562-7855
(Fax) 404/562-7881

TDD: 1-800-537-7697

Attachment F

LEP/SI Service Delivery Checklist



LIMITED ENGLISH PROFICIENT (LEP) AND SENSORY IMPAIRED (SI) CLIENT

SERVICE DELIVERY CHECKLIST

The "LEP/SI Service Delivery Checklist" is intended for use by supervisors, managers and administrators when evaluating the ability of each service area to provide meaningful access to LEP and SI clients. This checklist and all related forms with translations are also available at www.dhr.georgia.gov "Multicultural Resources." To provide meaningful access to services, managers must equip DHR service sites with the following:

- a copy of the State LEP/SI Plan and accompanying LEP/SI Policies and Procedure manual conveniently located and accessible for reference to all DHR staff,
- the LEP/SI Client Determination Forms or instructions for computer access to this form at each in-take area,
- a "designee" for entering all LEP/SI Client Determination Forms into the DHR database system,
- copies of the "I Speak" Census Bureaus card, which accommodates the identification of 30 languages likely to be encountered by DHR staff,
- copies of "Client Waiver of Right to No-Cost Interpreter Services" forms translated available in multiple languages at each in-take area,
- a sign posted in waiting areas notifying clients in at least ten languages of their right to no-cost language services and identifying language spoken,

- client “Assurance” Forms available in multiple languages in the waiting areas of service delivery sites,
- a sign posted in each intake area identifying the Client Language Coordinator and Language Access Team Member for each division and office as well as the OPGS LEP/SI Coordinator documenting; the computer link to the LEP/SI Client Determination Form, the DHR LEP/SI Multicultural Resources website (www.dhr.georgia.gov “Multicultural Resources,” including language resources; and commonly used language and TTY/TDD lines and contract interpreter numbers),
- a list of interpreter and telephone language line contact information, and
- a list of translated materials by title, form number and language.

Attachment G

Language Line Call List

LANGUAGE LINE CALL LOG

Division/Office _____ Employee Name _____
 Month/Year _____ Employee Load # _____

[illegible]

Attachment H

Translation Request Form

Georgia Department of Human Resources Translation Services Request Form

Job Title/Form Name:		
Date Submitted to OPGS:	Date Returned to Program:	
Contact Person:		
Telephone #:	Fax #:	
Requesting Agency/Department:		
Division/Office:	Program:	
Organization Code:	Project #:	Sub-class #:
Purchase Order #	Form #	

FORMAT (To Be Completed by Requesting Agency)

What service are you requesting? (Check All That Apply):

<input type="checkbox"/> Translating <input type="checkbox"/> Proofreading <input type="checkbox"/> Formatting <input type="checkbox"/> Desktop Publishing	Original Language: Translated Language(s):	<table style="width: 100%;"> <tr> <td><input type="checkbox"/> Spanish</td> <td><input type="checkbox"/> Arabic</td> </tr> <tr> <td><input type="checkbox"/> Vietnamese</td> <td><input type="checkbox"/> Somali</td> </tr> <tr> <td><input type="checkbox"/> Russian</td> <td><input type="checkbox"/> Bosnian</td> </tr> <tr> <td><input type="checkbox"/> Korean</td> <td><input type="checkbox"/> Portuguese</td> </tr> <tr> <td><input type="checkbox"/> Chinese</td> <td><input type="checkbox"/> Farsi</td> </tr> </table>	<input type="checkbox"/> Spanish	<input type="checkbox"/> Arabic	<input type="checkbox"/> Vietnamese	<input type="checkbox"/> Somali	<input type="checkbox"/> Russian	<input type="checkbox"/> Bosnian	<input type="checkbox"/> Korean	<input type="checkbox"/> Portuguese	<input type="checkbox"/> Chinese	<input type="checkbox"/> Farsi
<input type="checkbox"/> Spanish	<input type="checkbox"/> Arabic											
<input type="checkbox"/> Vietnamese	<input type="checkbox"/> Somali											
<input type="checkbox"/> Russian	<input type="checkbox"/> Bosnian											
<input type="checkbox"/> Korean	<input type="checkbox"/> Portuguese											
<input type="checkbox"/> Chinese	<input type="checkbox"/> Farsi											
Other: _____												

VENDOR INFORMATION (To Be Completed by The OPGS LEP/SI Client Services)

Date Forwarded to Vendor:	Date Received From Vendor:
Contact/Corporate Name:	
Address:	
Telephone#:	Fax #: Email:
Translator's Name:	
Qualified or Certified: <input type="checkbox"/> yes <input type="checkbox"/> no	
Specialty: <input type="checkbox"/> Medical Interpreter <input type="checkbox"/> Court Interpreter <input type="checkbox"/> Public Safety <input type="checkbox"/> Social Services	
Proofreader's Name:	
Qualified or Certified: <input type="checkbox"/> yes <input type="checkbox"/> no	
Specialty: <input type="checkbox"/> Medical Interpreter <input type="checkbox"/> Court Interpreter <input type="checkbox"/> Public Safety <input type="checkbox"/> Social Services	

AUTHORIZATION Signatures:

Language Access Team Representative or Designee _____ Date _____
 OPGS LEP/SI Coordinator _____ Date _____

TRANSLATION REQUEST FORM (TRF) INSTRUCTIONS

1. Write the name of the document or form under "Job Title/Form Name."
2. Enter the organizational and contact information into the first box.
3. Note if a form number is required. If so, complete the Forms Ordering/Reordering at <http://167.193.144.229/ocs/Workspace/index.html>. All foreign language form numbers should include a suffix designating the language translation – i.e. SP for Spanish, VT – for Vietnamese, SO for Somali, CH Chinese, RU for Russian, etc.). Contact the LEP/SI Coordinator for language acronyms – 404/657-5244.
4. Enter the organization code, project number, and sub-class number.
5. Obtain a purchase order number from the Purchasing Department. (Each requesting division or office is responsible for covering the cost associated with translating documents).
6. Document into which language the materials are to be translated.
7. Check the type of service requested (translation, proofreading, formatting, or desktop publishing).
8. Contact the designated Account Manager for your division or office to obtain a copy of the English version of the document on CD or diskette. If the document contains graphics, submit a "live" rather than PDF copy for translation. (The Office of Communications – OCS – maintains a list of Account Managers).
9. Forward the completed TRF form, copy of the purchase order, and CD or diskette containing the material to be translated to the Language Access Team (LAT) member or designee representing your division or office for approval.
10. The LAT representative will forward the TRF, purchase order, and CD or diskette to the Account Manager for the Office of Communications (OCS) who will then forward the request to the LEP/SI Coordinator.
11. The LEP/SI Coordinator will complete the Vendor Information section and send the materials to an approved translation vendor.
12. Upon receipt of the translated document, the LEP/SI Coordinator will provide the LAT representative with a camera-ready copy, CD and/or diskette in PDF file, and Receiving Report.
13. The LAT member or account manager will forward the finished product to the contact noted on the TRF for printing.
14. The LEP/SI Coordinator or designee will maintain a record of the request for translation and translated materials.

Attachment I

Average Hourly Rate Charged by Interpreters in Georgia

Average Hourly Rates Charged by Interpreters in Georgia

The following lists the average rate charged by interpreters by language. DHR divisions and offices are encouraged to use this information when negotiating the cost of interpreter services.

Language	Average Hourly Rate
American Sign Language	\$28
Amharic	\$30
Arabic	\$35
Bosnian	\$28
Bulgarian	\$30
Chinese (Mandarin & Cantonese)	\$40
Czech	\$30
Dinka	\$35
Farsi and Dari	\$30
French	\$28
German	\$28
Haitian Creole	\$28
Hebrew	\$30
Italian	\$28
Korean	\$30
Kurdish	\$30
Oromo	\$30
Persian	\$30
Polish	\$30
Portuguese	\$28
Russian	\$30
Romanian	\$28
Serbo-Croatian	\$28
Somali	\$30
Spanish	\$28
Swahili	\$35
Tagalog (Philippine)	\$28
Tigrinya	\$30
Ukrainian	\$30
Vietnamese	\$40
Wolof	\$40
Yoruba	\$40